

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003925

FILED  
Apr 05, 2009  
Secretary of State

Entity Name: BARNABAS COMMUNITY MINISTRIES, INC

## Current Principal Place of Business:

18800 NW 2ND AVENUE  
SUITE 117  
MIAMI GARDENS, FL 33161

## New Principal Place of Business:

## Current Mailing Address:

18800 NW 2ND AVENUE  
SUITE 117  
MIAMI GARDENS, FL 33161

## New Mailing Address:

FEI Number: 26-3039402      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VILSON, YVANE  
11907 W. BISCAYNE CANAL DR.  
MIAMI, FL 33161      US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

## OFFICERS AND DIRECTORS:

Title: PDC ( ) Delete  
Name: VILSON, YVANE  
Address: 11907 W. BISCAYNE CANAL DR.  
City-St-Zip: MIAMI, FL 33161

Title: TD ( ) Delete  
Name: MATHIAS, NADINE  
Address: 1973 NE 168TH ST., APT.2  
City-St-Zip: N. MIAMI BCH, FL 33162

Title: D ( ) Delete  
Name: MCDONALD, JOHN  
Address: 2248 45TH ST. SW  
City-St-Zip: NAPLES, FL 34116

Title: VPD ( ) Delete  
Name: DESROSIERS, EVANS  
Address: 18800 NW 2ND AVENUE  
City-St-Zip: MIAMI GARDENS, FL 33161

Title: SD ( ) Delete  
Name: JACQUES, ALEX JR  
Address: 18800 NW 2ND AVENUE  
City-St-Zip: MIAMI GARDENS, FL 33161

Title: D ( ) Delete  
Name: DELMONT, DENISE  
Address: 18800 NW 2ND AVENUE  
City-St-Zip: MIAMI GARDENS, FL 33161

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DENISE DELMONT

D

04/05/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date