

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000000035

FILED
Jun 09, 2009
Secretary of State

Entity Name: WEST BROWARD MINISTRIES, INC.

Current Principal Place of Business:

1200 NW 19 STREET
FORT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

1200 NW 19 STREET
FORT LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DAVIDSON-STEPHENS, CAMEY
9350 NW 34 COURT
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

DAVIDSON-STEPHENS, CAMEY P
9350 NW 34 COURT
SUNRISE, FL 33351 US

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: CAMEY DAVIDSON-STEPHENS

06/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DAVIDSON-STEPHENS, CAMEY
Address: 9350 NW 34 COURT
City-St-Zip: SUNRISE, FL 33351

Title: V () Delete
Name: STEPHENS, WALTER H
Address: 9350 NW 34 COURT
City-St-Zip: SUNRISE, FL 33351

Title: S () Delete
Name: NEMBARD, YVONNE
Address: 3361 NW 75 TERRACE
City-St-Zip: LAUDERHILL, FL 33319

Title: T () Delete
Name: DAVIDSON, EON T
Address: 6320 NW 11 STREET
City-St-Zip: SUNRISE, FL 33313

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DAVIDSON-STEPHENS, CAMEY P
Address: 9350 NW 34 COURT
City-St-Zip: SUNRISE, FL 33351

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: CAMEY DAVIDSON-STEPHENS

P

06/09/2009

Electronic Signature of Signing Officer or Director

Date