

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15621

FILED
Mar 03, 2008
Secretary of State

Entity Name: THE FELLOWSHIP OF SUBTLE LIGHT, INC.

Current Principal Place of Business:

3939 LOQUAT AVENUE
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

3939 LOQUAT AVENUE
MIAMI, FL 33133

New Mailing Address:

FEI Number: 59-2710251

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, GEORGE P
3939 LOQUAT AVENUE
MIAMI, FL 33133 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: CPD () Delete
Name: ROBINSON, GEORGE P
Address: 3939 LOQUAT AVE
City-St-Zip: MIAMI, FL 33133 US

Title: TVD () Delete
Name: ROBINSON, VANESSA
Address: 3939 LOQUAT AVENUE
City-St-Zip: MIAMI, FL 33133 US

Title: STD () Delete
Name: SHERMAN, LISA
Address: 3191 CORAL WAY - SUITE 632
City-St-Zip: CORAL GABLES, FL 33145 US

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:

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: GEORGE ROBINSON

PRES

03/03/2008

Electronic Signature of Signing Officer or Director

Date