

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19017

**FILED**  
**May 01, 2011**  
**Secretary of State**

**Entity Name:** THE STAR OF DAVE'S TEMPLE, INC.

**Current Principal Place of Business:**

2260 N W 117TH ST  
NORTH MIAMI, FL 33167 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 680580  
2260 N W 117TH ST  
NORTH MIAMI, FL 33167 US

**New Mailing Address:**

**FEI Number:** 65-0030205      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILSON, MAMIE  
2260 NW 117TH STREET  
MIAMI, FL 33167 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: VD  
Name: WILSON, REV. JOHN  
Address: 9009 NW 21 AVENUE  
City-St-Zip: MIAMI, FL

Title: D  
Name: WILSON, REV. WESTLY  
Address: 9000 NW 20TH AVENUE  
City-St-Zip: MIAMI, FL

Title: PD  
Name: WILSON, MAMIE  
Address: 2260 NW 117TH STREET  
City-St-Zip: NORTH MIAMI, FL 33167

Title: TRUS  
Name: WILSON, YVONNE  
Address: 9026 NW 20TH AVE  
City-St-Zip: MIAMI, FL 33147

I hereby 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 all other like empowered.

SIGNATURE: YVONNE WILSON

TRUS

05/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date