## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N31734

FILED Apr 20, 2008 Secretary of State

Entity Name: KERR MEMORIAL UNITED METHODIST CHURCH INC.

Current Principal Place of Business: New Principal Place of Business:

10066 W INGIGO STREET 10066 W INDIGO STREET

MIAMI, FL 33157 MIAMI, FL 33157

Current Mailing Address: New Mailing Address:

10066 W INGIGO STREET 10066 W INDIGO STREET

MIAMI, FL 33157 MIAMI, FL 33157

FEI Number: 36-2167731 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

ROGERS, EDMOND

10066 W. INDIGO STREET

MIAMI, FL 33157 US

JOHNSON, LEROY

10066 W. INDIGO STREET

MIAMI, FL 33157 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: JOHNSON, LEROY 04/20/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T () Delete Title: T (X) Change () Addition

 Name:
 ROGERS, EDMOND,
 Name:
 JOHNSON, LEROY

 Address:
 10235 SW 177 ST
 Address:
 14421 CARVER DR.

 City-St-Zip:
 MIAMI, FL 33157
 City-St-Zip:
 MIAMI, FL 33176

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 HOLMES, MADISON
 Name:

 Address:
 7851 SW 144 ST
 Address:

 City-St-Zip:
 MIAMI, FL 33158
 City-St-Zip:

Title: T ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 JOHNSON, LEROY
 Name:
 ROGERS, EDMOND

 Address:
 14421 CARVER DR
 Address:
 10235 SW 177 STREET

 City-St-Zip:
 MIAMI, FL 33176
 City-St-Zip:
 MIAMI, FL 33157

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 JOHNSON, REGINA
 Name:

 Address:
 14421 CARVER DRIVE
 Address:

 City-St-Zip:
 MIAMI, FL 33176
 City-St-Zip:

 Name:
 CAMPBELL, DAVID
 Name:

 Address:
 13135 SOUTHWEST 265 TERRACE
 Address:

 City-St-Zip:
 MIAMI, FL 33032
 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: JOHNSON, LEROY T 04/20/2008