

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Mar 10, 2008
Secretary of State**

DOCUMENT# N35047

Entity Name: THE FIRST METHODIST CHURCH OF MIAMI BEACH, INC.**Current Principal Place of Business:**4760 PINE TREE DRIVE
MIAMI BEACH, FL 33140 US**New Principal Place of Business:****Current Mailing Address:**4760 PINE TREE DRIVE
MIAMI BEACH, FL 33140 US**New Mailing Address:**

FEI Number: 65-0227624

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:COBB, HAROLD
7711 HAWTHORNE AVE
MIAMI, FL 33143 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: D () Delete
Name: GUFFY, JOHN
Address: 3 ISLAND AVE APT 14-K
City-St-Zip: MIAMI BEACH, FL 33139Title: D () Delete
Name: WHITING, KEN
Address: 742 NE 68 ST
City-St-Zip: MIAMI, FL 33138Title: D () Delete
Name: WINDLE, DARRELL
Address: 2829 INDIAN CREEK DR
City-St-Zip: MIAMI BEACH, FL 33140Title: D () Delete
Name: DEWIS, TERRY
Address: 2300 IBIS ISLE RD
City-St-Zip: PALM BEACH, FL 33480Title: D () Delete
Name: BARFIELD, BRETT
Address: 2836 ROYAL PALM
City-St-Zip: MIAMI BEACH, FL 33140Title: D () Delete
Name: COLAS, ORLANDO
Address: 175 NW 100 ST
City-St-Zip: MIAMI BEACH, FL 33150**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: D (X) Change () Addition
Name: COBB, HAROLD
Address: 7711 HAWTHORNE AVE
City-St-Zip: MIAMI, FL 33143

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: MELISSA PISCO

Electronic Signature of Signing Officer or Director

REV

03/10/2008

Date