

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45697

FILED
Sep 16, 2008
Secretary of State

Entity Name: THE POOL OF BETHESDA CHRISTIAN CENTER, INC.

Current Principal Place of Business:

7040 PINES BLVD
PEMBROKE PINES, FL 33024 US

New Principal Place of Business:

Current Mailing Address:

16171 S.W. 2ND DRIVE
PEMBROKE PINES, FL 33027 US

New Mailing Address:

FEI Number: 65-0314027 **FEI Number Applied For ()** **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:

Name and Address of New Registered Agent:

MURPHY, WILLIE
16171 S.W. 2ND DRIVE
PEMBROKE PINES, FL 33027 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MURPHY, WILLIE
Address: 16171 S.W. 2ND DRIVE
City-St-Zip: PEMBROKE PINES, FL 33027

Title: SD () Delete
Name: MURPHY, WINIFRED
Address: 16171 SW 2ND DR
City-St-Zip: PEMBROKE PINES, FL 33027

Title: TD () Delete
Name: WILDER, TERRACE
Address: 4120 SW 151ST TERR
City-St-Zip: MIRAMAR, FL 33027

Title: D () Delete
Name: MORANT, SHELDON
Address: 11601 SOUTHWEST 139 TERRACE
City-St-Zip: MIAMI, FL

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:

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: TERRANCE WILDER

TD

09/16/2008

Electronic Signature of Signing Officer or Director

Date