

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49577

FILED  
Feb 26, 2009  
Secretary of State

Entity Name: ALTA VISTA PRESBYTERIAN CHURCH, INC.

**Current Principal Place of Business:**

12555 NW 17TH AVE  
NORTH MIAMI, FL 33167

**New Principal Place of Business:**

12555 NW 17TH AVE  
NORTH MIAMI, FL 33167 US

**Current Mailing Address:**

12555 NW 17TH AVE  
NORTH MIAMI, FL 33167

**New Mailing Address:**

12555 NW 17TH AVE  
NORTH MIAMI, FL 33167 US

FEI Number: 65-0087501

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

JEFFERSON, BENJAMIN C  
1441 NW 138TH 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: CD ( ) Delete  
Name: JEFFERSON, BENJAMIN C  
Address: 1441 NW 138TH STREET  
City-St-Zip: MIAMI, FL 33167

Title: TD ( ) Delete  
Name: JEFFERSON, PATRICIA A  
Address: 1441 NW 138TH STREET  
City-St-Zip: MIAMI, FL 33167

Title: D ( ) Delete  
Name: FOX, JOHN  
Address: 7921 NORMANDY STREET  
City-St-Zip: MIRAMAR, FL 33023

Title: D ( ) Delete  
Name: HEREFORD, LOIS  
Address: 1325 NW 123RD STREET  
City-St-Zip: MIAMI, FL 33167

Title: D (X) Delete  
Name: MOORE, GRACE  
Address: 1460 NW 114TH STREET  
City-St-Zip: MIAMI, FL 33167

**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:

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: BENJAMIN C. JEFFERSON

CD

02/26/2009

Electronic Signature of Signing Officer or Director

Date