

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000160

FILED
Jan 26, 2010
Secretary of State

Entity Name: AFRO-AMERICAN COUNCIL OF MINISTERS OF FORT PIERCE, INC.

Current Principal Place of Business:

4804 EVERGREEN AVE
FORT PIERCE, FL 34947

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 583
FORT PIERCE, FL 34954

New Mailing Address:

FEI Number: 65-0387907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, HOWARD D
2221 N 41ST STREET
FORT PIERCE, FL 34946 US

Name and Address of New Registered Agent:

KITT, WILLIE G
437 N 18TH STREET
FORT PIERCE, FL 34950 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: WILLIE G KITT

01/26/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: KITT, WILLIE G
Address: 437 N 18TH STREET
City-St-Zip: FORT PIERCE, FL 34950

Title: V
Name: BALDWIN, ELDREW
Address: 16914 NW BARODA ST
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: S
Name: EFFEND, TOMMY L
Address: 4804 EVERGREEN AVE
City-St-Zip: FORT PIERCE, FL 34947

Title: D
Name: JACKSON, SARAH
Address: 1516 SAN DIEGO
City-St-Zip: FORT PIERCE, FL 34946

Title: D
Name: LEE, JOHN SR.
Address: 2849 HARSON WAY
City-St-Zip: FORT PIERCE, FL 34946

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: TOMMY L. EFFEND

SEC.

01/26/2010

Electronic Signature of Signing Officer or Director

Date