## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000003914

FILED Jun 30, 2009 Secretary of State

Entity Name: SHILOH APOSTOLIC CHURCH, FAITH WORSHIP CENTER INC.

Current P				
Current Principal Place of Business:		New Principal Place of Business	New Principal Place of Business:	
	T STREET DOD, FL 33024 US	9300 NW 40 COURT SUNRISE, FL 33351 US		
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
	40TH. COURT , FL 33351 US	9300 NW 40 COURT SUNRISE, FL 33351 US		
	:: 65-0450163 FEI Number Applied For ( ) nce with s. 607.193(2)(b), F.S., the corporation did no		of Status Desired (X)	
Name and	d Address of Current Registered Agent:	Name and Address of New Regis	tered Agent:	
6475 TÁF	AUGHN D T STREET OOD, FL 33024 US	SMITH, VAUGHN D 9300 NW 40 COURT SUNRISE, FL 33351 US		
	e named entity submits this statement for the p e of Florida.	ourpose of changing its registered office or reg	gistered agent, or both,	
SIGNATUI	RE: VAUGHN SMITH	06/	30/2009	
	Electronic Signature of Registered Age	ent D	ate	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFIC	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	PD ( ) Delete SMITH, VAUGHN D 9300 NW 40TH. COURT SUNRISE, FL 33351	Title: ( ) Change ( ) Name: Address: City-St-Zip:	Addition	
Title: Name: Address: City-St-Zip:	VD ( ) Delete SMITH, MARILYN M 9300 NW 40TH. COURT SUNRISE, FL 33351	Title: ( ) Change ( ) Name: Address: City-St-Zip:	Addition	
Title:	CD ( ) Delete WALSH, LEE H 9300 NW 40TH. COURT	Title: ( ) Change ( ) Name: Address:	Addition	
Name: Address: City-St-Zip:	SUNRISE, FL 33351	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: MARILYN SMITH VD 06/30/2009