

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005470

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** THE ST. JAMES AFRICAN METHODIST EPISCOPAL CHURCH OF MIAMI, INC.

**Current Principal Place of Business:**

1845 NW 65TH STREET  
MIAMI, FL 33147

**New Principal Place of Business:**

**Current Mailing Address:**

1845 NW 65TH STREET  
MIAMI, FL 33147

**New Mailing Address:**

**FEI Number:** 59-1358321

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, BENNY L  
1845 NW 65TH ST  
MIAMI, FL 33147 US

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

WILLIAMS, JIMMIE L III  
1845 NW 65TH ST  
MIAMI, FL 33147 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: JIMMIE L. WILLIAMS, III

04/27/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T/T  
Name: SPARKS, LOUIS  
Address: 1845 NW 65TH STREET  
City-St-Zip: MIAMI, FL 33147

Title: ST  
Name: FLOYD, ROBIN  
Address: C/O 1845 NW 65TH STREET  
City-St-Zip: MIAMI, FL 33147

Title: CT/P  
Name: WILLIAMS, JIMMIE L III  
Address: 1845 NW 65TH STREET  
City-St-Zip: MIAMI, FL 33147

Title: T  
Name: LONG, BILLIE L  
Address: 6547 NW 201ST TERRACE  
City-St-Zip: MIAMI, FL 33015

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: JIMMIE L. WILLIAMS, III

CT/P

04/27/2012

Electronic Signature of Signing Officer or Director

Date