

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000318

FILED
Mar 21, 2009
Secretary of State

Entity Name: GOSPEL FELLOWSHIP "CHURCH ON THE MOVE FOR CHRIST" INCORPORATION

Current Principal Place of Business:

849 SW 7 ST
HOMESTEAD, FL 33030 US

New Principal Place of Business:

Current Mailing Address:

30714 SW 188 CT
HOMESTEAD, FL 33030

New Mailing Address:

30714 SW 188 CT
HOMESTEAD, FL 33030 US

FEI Number: 65-0567885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCCORMICK, CHARLES
30714 SW 188TH COURT
HOMESTEAD, FL 33030 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: P () Delete
Name: MCCORMICK, CHARLES
Address: 30714 SW 188 CT
City-St-Zip: HOMESTEAD, FL 33030

Title: V () Delete
Name: MCCORMICK, MISSOURI
Address: 30714 SW 188 CT
City-St-Zip: HOMESTEAD, FL 33030

Title: D () Delete
Name: WOODSS, MARY A
Address: 11850 SW 221 ST
City-St-Zip: GOULDS, FL 33170

Title: D () Delete
Name: MCGILL, T
Address: 3156 SW 6 CT, APT 3
City-St-Zip: HOMESTEAD, FL 33030

Title: D () Delete
Name: LINDA RANKINS,
Address: 393 NW 3RD AVE
City-St-Zip: FLORIDA CITY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WILLAMS, MARY A
Address: 11850 SW 221 ST
City-St-Zip: GOULDS, FL 33170

Title: D (X) Change () Addition
Name: MCGILL, THELMA
Address: 3156 SW 6 CT, APT 3
City-St-Zip: HOMESTEAD, FL 33030

Title: D (X) Change () Addition
Name: WILLAMS, VANICA
Address: 1070 NW 9 AVE
City-St-Zip: FLORIDA CITY, FL 33034

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: MISSOURI MCCORMICK

V

03/21/2009

Electronic Signature of Signing Officer or Director

_____ Date