

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003590

FILED
Aug 13, 2009
Secretary of State

Entity Name: HOMELESS THRIFT MINISTRIES, INC.

Current Principal Place of Business:

51 N. W. 71STREET
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

2005 N.W. 4TH CT.
MIAMI, FL 33127

New Mailing Address:

3327 N.W. 3RD AVENUE
MIAMI, FL 33127

FEI Number: 11-3758453 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HAYES, MARVETTE
2005 NW 4 CT
MIAMI, FL 33127 US

Name and Address of New Registered Agent:

HAYES, MARVETTE
3327 N.W. 3 AVENUE
MIAMI, FL 33127 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: _____

08/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HAYES, MARVERTTE
Address: 2005 NW 4 CT
City-St-Zip: MIAMI, FL 33127

Title: ASST () Delete
Name: JOHNSON, WYLENE
Address: 585 NW 46 ST
City-St-Zip: MIAMI, FL 33126

Title: D () Delete
Name: LEWIS, RICHARD
Address: 2240 NW 52 ST
City-St-Zip: MIAMI, FL 33142

Title: D () Delete
Name: WILLIAMS, SATARA
Address: 950 NW 75 ST
City-St-Zip: MIAMI, FL 33142

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HAYES, MARVERTTE
Address: 3327 NW 3 AVENUE
City-St-Zip: MIAMI, FL 33127

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: MARVETTE HAYES

DIRE

08/13/2009

Electronic Signature of Signing Officer or Director

Date