## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000003977

FILED Jul 12, 2007 Secretary of State

Entity Name: GRANT CHAPEL A.M.E. CHURCH INC.

**Current Principal Place of Business: New Principal Place of Business:** 1616 S DOUGLAS ST LAKE WORTH, FL 33460 **Current Mailing Address: New Mailing Address:** P O BOX 1281 1616 SO DOUGLAS ST LAKE WORTH, FL 33460 LAKE WORTH, FL 334601281 US FFI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X) 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: Name and Address of New Registered Agent: WILLIS, TOMMY WILLIS, TOMMY 10313 TRIANON PL. 10313 TRIANON PL WELLINGTON, FL 33467 WELLINGTON, FL 33449 US 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: 07/12/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ADAMS, ROGERY REV. Name: Name: Address: 775 HERITAGE DR. Address: WESTON, FL 33326 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition BRAY, ROBERT Name: Name: Address: 916 12 COURT SOUTH Address: City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip: Title: () Delete Title: () Change () Addition WILLIS, TOMMY Name: Name: 10313 TRIANON PL. Address: Address: City-St-Zip: WELLINGTON, FL 33467 City-St-Zip: Title: Title: () Change () Addition ( ) Delete WESLEY, CARL Name: Name: 597 DOLPHIN DRIVE Address: Address: City-St-Zip: DELRAY BEACH, FL City-St-Zip: Title: Title: () Delete () Change () Addition ODOM, BAZZIE Name: Name: 8591 WINNIPESAUKEE WAY Address: Address: LAKE WORTH, FL 33467 City-St-Zip: 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: TOM WILLIS T 07/12/2007