2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2009
Secretary of State

DOCUMENT# N94000003977

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

Current Principal Place of Business:

1616 S DOUGLAS ST
LAKE WORTH, FL 33460

New Principal Place of Business:

Current Mailing Address:

P O BOX 1281
LAKE WORTH, FL 334601281 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WILLIS, TOMMY
10313 TRIANON PL.
WELLINGTON, FL 33449 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:	WHITE, BETTY REV.	
Address:	18810 NW 48 CT	
City-St-Zip:	MIAMI, FL 33055	
Title:	S	( ) Delete
Name:	BRAY, ROBERT	
Address:	916 12 COURT SOUTH	
City-St-Zip:	LAKE WORTH, FL 33460	
Title:	T	( ) Delete
Name:	WILLIS, TOMMY	
Address:	10313 TRIANON PL.	
City-St-Zip:	WELLINGTON, FL 33467	
Title:	S	( ) Delete
Name:	WESLEY, CARL	
Address:	597 DOLPHIN DRIVE	
City-St-Zip:	DELRAY BEACH, FL	
Title:	S	( ) Delete
Name:	ODOM, BAZZIE	
Address:	8591 WINNIPESAUKEE WAY	
City-St-Zip:	LAKE WORTH, FL 33467	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: TOM WILLIS T 03/21/2009

Electronic Signature of Signing Officer or Director — Date