

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003338

FILED
Mar 07, 2012
Secretary of State

Entity Name: SAINT JAMES A.M.E. CHURCH OF PAHOKEE, INC.

Current Principal Place of Business:

465 SOUTH LAKE AVE.
PAHOKEE, FL 33476 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 502
PAHOKEE, FL 33476

New Mailing Address:

FEI Number: 65-0099174

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, ALFRED REV
18520 NW 23 AVENUE
MIAMI GARDEN, FL 33056 US

Name and Address of New Registered Agent:

JONES, ALFRED D REV
18520 NW 23 AVENUE
MIAMI GARDEN, FL 33056 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: CAROLYN JOHNSON

03/07/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DS
Name: ALLEN, GERALDINE L
Address: 123 SOUTH FLAME AVE
City-St-Zip: PAHOKEE, FL 33476

Title: DT
Name: JOHNSON, WILLIE L JR
Address: 18726 46TH COURT N
City-St-Zip: LOXAHATCHEE, FL 33470

Title: DS
Name: ROBERTSON, MAYBELL D
Address: 1502 SINGLETARY AVE
City-St-Zip: PAHOKEE, FL 33476

Title: DS
Name: JOHNSON, CAROLYN
Address: 18726 46TH COURT N
City-St-Zip: LOXAHATCHEE, FL 33470

Title: DS
Name: JOHNSON, CAROLYN
Address: 18726 46 CT N.
City-St-Zip: LOXAHATCHEE, FL 33470

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: CAROLYN JOHNSON

SEC.

03/07/2012

Electronic Signature of Signing Officer or Director

Date