

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006610

FILED  
Mar 31, 2008  
Secretary of State

**Entity Name:** CHURCH OF GOD SEEKER OF SOULS, INC.

**Current Principal Place of Business:**

15115 MEMORIAL HWY  
MIAMI, FL 33169 US

**New Principal Place of Business:**

**Current Mailing Address:**

1070 NW 108TH ST  
N MIAMI, FL 33168 US

**New Mailing Address:**

**FEI Number:** 65-0808484

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LAMBERT, RICHEMOND  
1070 NW 108TH ST  
N MIAMI, FL 33168 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: MR ( ) Delete  
Name: LAMBERT, RICHEMOND PASTOR  
Address: 1070 NW 108TH ST  
City-St-Zip: N MIAMI, FL 33168

Title: MS ( ) Delete  
Name: CADET, LAVANETE  
Address: 1500 NE 151ST ST #101  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: MS ( ) Delete  
Name: EXAVIER, MICHALDA  
Address: 170 NE 121 STREET  
City-St-Zip: NORTH MIAMI, FL 33161 US

Title: MS ( ) Delete  
Name: METELLUS, RUTH M  
Address: 1500 NE 151 STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33161 US

Title: MRS ( ) Delete  
Name: LAMBERT, MARIE C  
Address: 1070 NW 108 STREET  
City-St-Zip: MIAMI, FL 33161 US

Title: MR ( ) Delete  
Name: LAMBERT, MARDOCHEE R  
Address: 1070 NW 108 STREET  
City-St-Zip: MIAMI, FL 33161 US

**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:

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: RICHEMOND LAMBERT

DIRE

03/31/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date