

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000834

FILED
May 16, 2009
Secretary of State

Entity Name: CHRISTIAN CATHEDRAL OF THE APOSTOLIC FAITH, CORPORATION

Current Principal Place of Business:

1441 NW 196TH ST.
MIAMI GARDENS, FL 33169

New Principal Place of Business:

Current Mailing Address:

1441 NW 196TH ST.
MIAMI GARDENS, FL 33169 US

New Mailing Address:

FEI Number: 65-0795507 **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:

MINUS-JONES, ALTHEA
1441 NW 196TH ST.
MIAMI GARDENS, FL 33169 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: DP () Delete
Name: MINUS-JONES, ALTHEA
Address: 1441 NW 196TH ST.
City-St-Zip: MIAMI, FL 33169

Title: DVP () Delete
Name: MINUS, CHARLES A III
Address: 1441 NW 196TH ST.
City-St-Zip: MIAMI, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ALTHEA MINUS-JONES

DP

05/16/2009

Electronic Signature of Signing Officer or Director

Date