

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N98000003486

1. Entity Name
ST. PAUL AFRICAN METHODIST EPISCOPAL CHURCH
OF STUART, INC.



Principal Place of Business
900 E AVE
STUART, FL

Mailing Address
P.O. BOX 2462
STUART, FL 34994

FILED

07 JAN 25 AM 10:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

09012006

Chg-NP

CR2E037 (4/06)

07

4. FEI Number
59-2366213

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SMITH, HECTOR REVY
901 CENTRAL AVE
STUART, FL 34994

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by September 6, 2006

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRCV
SMITH, HECTOR
901 CENTRAL AVE
STUART, FL 34994

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SCOTT, FAY A
906 E LAKE STREET
STUART, FL 34994

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition
600086456446
01/29/07--01050--030 **70.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LANGSTON, DEBORAH
911 E 9TH ST
STUART, FL 34994

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GRANT, LORENE
1608 ARAPAHO AVE
STUART, FL 34994

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MCCARTY, NOLA
235 NW CHARLIE GREEN TERR
SUTART, FL 34994

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BELLE, DONALD
906 E HALL ST
STUART, FL 34994

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Pastor Rev. Hector Smith SR.

Date

Daytime Phone #