

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004026

FILED
Jan 09, 2009
Secretary of State

Entity Name: WORLDWIDE MEDICAL-DENTAL EVANGELICAL MISSION, INC.

Current Principal Place of Business:

1615 FARRIER TRAIL
CLEARWATER, FL 33765

New Principal Place of Business:

Current Mailing Address:

1615 FARRIER TRAIL
CLEARWATER, FL 33765

New Mailing Address:

FEI Number: 22-3663579

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: PD () Delete
Name: SOLIMAN, SHOUKRY
Address: 1615 FARRIER TRAIL
City-St-Zip: CLEARWATER, FL 33765

Title: VD () Delete
Name: SOLOMAN, SABRIE
Address: 1615 FARRIER TRAIL
City-St-Zip: CLEARWATER, FL 33765

Title: STD () Delete
Name: ALLISON, LINDA
Address: 1615 FARRIER TRAIL
City-St-Zip: CLEARWATER, FL 33765

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:

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: SHOUKRY SOLIMAN

PD

01/09/2009

Electronic Signature of Signing Officer or Director

Date