

**2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Oct 15, 2005  
Secretary of State**

DOCUMENT# N99000004672

Entity Name: ST. JOSEPH AME CHURCH INC.

**Current Principal Place of Business:**P.O.BOX 1444  
WEST PALM BEACH, FL 33417**New Principal Place of Business:**289 SW 159TH LANE  
SUNRISE, FL 33326**Current Mailing Address:**P.O.BOX 1444  
WEST PALM BEACH, FL 33402**New Mailing Address:**289 SW 159TH LANE  
SUNRISE, FL 33326

FEI Number: 65-0941818

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**BESS, ALEXANDER JR  
4771 PINE KNOTT LN  
WEST PALM BEACH, FL 33417 US**Name and Address of New Registered Agent:**MCCLURE, DONNA  
289 SW159TH LANE  
SUNRISE, FL 33326 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: REV. DONNA MCCLURE

10/15/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: D ( ) Delete  
Name: MCLCURE, ROBERT  
Address: 3174 NW 40 CT  
City-St-Zip: LAUDERDALE LAKES, FL 33309Title: P ( ) Delete  
Name: BESS,, ALEXANDER JR  
Address: 4771 PINE KNOTT LN  
City-St-Zip: WEST PALM BEACH, FL 33417Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: D (X) Change ( ) Addition  
Name: MCCLURE, ROBERT SR.  
Address: 289 SW 159TH LANE  
City-St-Zip: SUNRISE, FL 33326Title: P (X) Change ( ) Addition  
Name: MCCLURE, DONNA  
Address: 289 SW 159TH LANE  
City-St-Zip: SUNRISE, FL 33326Title: D ( ) Change (X) Addition  
Name: JACOBS, SHIRLEY  
Address: 811 NW 8TH STREET  
City-St-Zip: DELRAY BEACH, FL 33445

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DONNA MCCLURE

P

10/15/2005

Electronic Signature of Signing Officer or Director

Date