2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006240

FILED Apr 25, 2006 Secretary of State

Entity Name: NEW SAINT STEPHEN AFRICAN METHODIST EPISCOPAL CHURCH OF OKEECHOBBEE, FLORIDA,

INC

Current Principal Place of Business: New Principal Place of Business:

1001 NE 16TH AVE OKEECHOBEE, FL 34972

Current Mailing Address: New Mailing Address:

P.O. BOX 836 OKEECHOBEE, FL 34973

FEI Number: 50-0170357 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

JENKINS, CORNELIUS E REV.

2403 S. DUNBAR AVENUE

MELBOURNE, FL 32901 US

HEASTIE, RAYMOND G REV.

1148 WEST 32ND STREET

RIVIERA BEACH, FL 33404 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. RAYMOND G. HEASTIE 04/25/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PE (X) Change () Addition

 Name:
 STEWART, EDWARD REV.
 Name:
 STEWART, EDWARD REV.

 Address:
 831 N.E. 16TH AVENUE
 Address:
 831 N.E. 16TH AVENUE

 City-St-Zip:
 OKEECHOBEE, FL 34972
 OKEECHOBEE, FL 34972

Title: TD () Delete Title: () Change () Addition

 Name:
 WELCH, WILLIE
 Name:

 Address:
 1550 N.E. 14TH STREET
 Address:

 City-St-Zip:
 OKEECHOBEE, FL 34972
 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

 Name:
 MURPHY, MELISSA
 Name:

 Address:
 1797 N.E. 2ND STREET
 Address:

 City-St-Zip:
 OKEECHOBEE, FL 34972
 City-St-Zip:

Title: TD () Delete Title: () Change () Addition

 Name:
 RYLES, TRENES
 Name:

 Address:
 399 N.E. 174TH DRIVE
 Address:

 City-St-Zip:
 OKEECHOBEE, FL 34972
 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

 Name:
 DELAGALL, TONY
 Name:

 Address:
 115 NE 13TH AVENUE
 Address:

 City-St-Zip:
 OKEECHOBEE, FL 34972
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: EDWARD STEWART REV 04/25/2006