Identification Number | Corporation Name
----------------------|----------------------
716301                | ST. MATTHEW'S AND ST. JOSEPH'S EPISCOPAL CHURCH

Resident agent name and mailing address of the registered office
ALETHEA BELFON
8850 WOODWARD AVE
DETROIT MI 482022137

The address of the registered office
8850 WOODWARD AVE
DETROIT MI 482022137

Describe the purpose and activities of the corporation during the year covered by this report:
ECCLESIASTICAL

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Business or Residence Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALBERT EDWARDS</td>
<td>PRESIDENT</td>
<td>15420 BILTMORE DETROIT MI 482271556</td>
</tr>
<tr>
<td>ERAINA LINSDEAU</td>
<td>SECRETARY</td>
<td>21025 LAKELAND ST. CLAIRE SHORES MI 48081</td>
</tr>
<tr>
<td>ALETHEA BELFON</td>
<td>TREASURER</td>
<td>19487 WESTMORELAND DETROIT MI 482192144</td>
</tr>
<tr>
<td>ANN MARIE HINES</td>
<td>DIRECTOR</td>
<td>16581 LENORE DETROIT MI 48219</td>
</tr>
<tr>
<td>INDIRA SAMUELS</td>
<td>DIRECTOR</td>
<td>2211 LAMOTHE DETROIT MI 482062669</td>
</tr>
<tr>
<td>LES BURNETT</td>
<td>DIRECTOR</td>
<td>39285 LANCASTER DR. FARMINGTON HILLS MI 483311630</td>
</tr>
</tbody>
</table>

Electronic Signature

Filed By: ALETHEA BELFON
Title: Treasurer
Phone: 313-871-4750

I certify that this filing is submitted without fraudulent intent and that I am authorized by the business entity to make any changes reported herein.

Payment Information

Payment Amount | Payment Date/Time       | Reference Nbr
---------------|-------------------------|-----------------|
$20.00         | 10/01/2009 15:43:22     | 71315 6800 716301 2009