

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761267

FILED
Apr 30, 2009
Secretary of State

Entity Name: NEW BIRTH HOUSE OF PRAYER FOR ALL PEOPLE, INC.

Current Principal Place of Business:

2300 NW 22ND STREET
FT. LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

PO BOX 5712
FT. LAUDERDALE, FL 33310

New Mailing Address:

FEI Number: 65-0013186 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCORMICK, QUEEN E
2300 NW 22ND STREET
FORT LAUDERDALE, FL 33311 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: MCCORMICK, QUEEN E.
Address: 8221 NW 51 COURT
City-St-Zip: LAUDERHILL, FL 33351

Title: VD () Delete
Name: MCCORMICK, SAMMIE
Address: 8221 NW 51 COURT
City-St-Zip: LAUDERHILL, FL 33351

Title: TD () Delete
Name: GAINES, ANGELA
Address: 3431 NW 6TH COURT
City-St-Zip: FT. LAUDERDALE, FL

Title: SD () Delete
Name: GILBERT, JULIE
Address: 2300 NW 22ND STREET
City-St-Zip: FORT LAUDERDALE, FL 33311

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:

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: QUEEN MCCORMICK

PF

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date