

2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Mar 17, 2008 08:00 A
Secretary of State

DOCUMENT # N10316	
1. Entity Name THE WORLDWIDE CHRISTIAN CENTER, INC.	

Principal Place of Business 450 N POWERLINE RD POMPANO BEACH, FL 33069 US	Mailing Address 450 N POWERLINE RD POMPANO BEACH, FL 33069 US
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03102008 No Chg-NP CR2E037 (4/06)

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4. FEI Number 65-0029979	Applied For Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent DOZIER, O'NEAL 3420 SANDS HARBOR TRACE POMPANO BEACH, FL 33069

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	U000000861349 04/03/08-80005-015 70.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARNER, MARY LOU 1201 NW 23 AVE FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRIS, WARNER 2920 NW 2ND STREET POMPANO BEACH, FL 33069
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARKER, REMELDA 210 SW 30TH AVENUE FT. LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DOZIER, ONEAL REV 3420 SANDS HARBOR TRACE POMPANO BEACH, FL 33069
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOZIER, LEKETIA B 3420 SANDS HARBOR TRACE POMPANO BEACH, FL 33069
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARKER, ARTHUR 210 SW 30TH AVENUE FT. LAUDERDALE, FL

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE: *Rev. O'Neal Dozier* 3/13/08 (951) 978-2020
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #