

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10316

FILED
Apr 28, 2009
Secretary of State

Entity Name: THE WORLDWIDE CHRISTIAN CENTER, INC.

Current Principal Place of Business:

450 N POWERLINE RD
POMPANO BEACH, FL 33069 US

New Principal Place of Business:

Current Mailing Address:

450 N POWERLINE RD
POMPANO BEACH, FL 33069 US

New Mailing Address:

FEI Number: 65-0029979

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOZIER, O'NEAL
3420 SANDS HARBOR TRACE
POMPANO BEACH, FL 33069 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: D () Delete
Name: BARNER, MARY LOU
Address: 1201 NW 23 AVE
City-St-Zip: FT LAUDERDALE, FL

Title: D () Delete
Name: HARRIS, WARNER
Address: 2920 NW 2ND STREET
City-St-Zip: POMPANO BEACH, FL 33069

Title: D () Delete
Name: PARKER, REMELDA
Address: 210 SW 30TH AVENUE
City-St-Zip: FT. LAUDERDALE, FL

Title: PD () Delete
Name: DOZIER, ONEAL REV
Address: 3420 SANDS HARBOR TRACE
City-St-Zip: POMPANO BEACH, FL 33069

Title: D () Delete
Name: DOZIER, LEKETIA B
Address: 3420 SANDS HARBOR TRACE
City-St-Zip: POMPANO BEACH, FL 33069

Title: D () Delete
Name: PARKER, ARTHUR
Address: 210 SW 30TH AVENUE
City-St-Zip: FT. LAUDERDALE, FL

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:

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: REV. O'NEAL DOZIER

PD

04/28/2009

Electronic Signature of Signing Officer or Director

Date