2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2008
Secretary of State

DOCUMENT# N95000000318

Entity Name: NEW DISCIPLES WORSHIP CENTER, INC.

Current Principal Place of Business:

239 N.E. 12TH AVENUE
BOYNTON BEACH, FL 33435 US

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 920
BOYNTON BEACH, FL 33425 US

New Mailing Address:

FEI Number: 65-0551253 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROWN, TOMMY L
8123 MYSTIC HARBOR CIRCLE
BOYNTON BEACH, FL 33436 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:	BROWN, TOMMY L	
Address:	8123 MYSTIC HARBOR CIRCLE	
City-St-Zip:	BOYNTON BEACH, FL 33436	
Title:	SD	( ) Delete
Name:	BROWN, DARLENE A	
Address:	8123 MYSTIC HARBOR CIRCLE	
City-St-Zip:	BOYNTON BEACH, FL 33436	
Title:	D	( ) Delete
Name:	DOBARD, PAULA L	
Address:	713 SW 2ND STREET, APT B	
City-St-Zip:	DELRAY BEACH, FL 33444	
Title:	D	( ) Delete
Name:	DAVIS, PATRICIA	
Address:	301 SW 8TH COURT	
City-St-Zip:	DELRAY BEACH, FL 33444	
Title:	O	( ) Delete
Name:	MCCRAY, NATHAN	
Address:	2563 N. CORAL TRACE CIRCLE	
City-St-Zip:	DELRAY BEACH, FL 33445	
Title:	D	( ) Delete
Name:	MCCLENOON, BRIDGETTE A	
Address:	100 BLACK OLIVE CRESCENT	
City-St-Zip:	ROYAL PALM BEACH, FL 33411	

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: BRIDGETTE MCCLENDON D 01/17/2008

Electronic Signature of Signing Officer or Director — Date