Entity Name: NEW SEVENTY NINTH STREET WORD CHURCH

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

INTERNATIONAL, INC.

Current Principal Place of Business:

2275 N W 79TH STREET MIAMI, FL 33147-4925

**DOCUMENT# 700949** 

## **Current Mailing Address:**

P.O. BOX 470365 MIAMI, FL 33247-0354 US

## FEI Number: 59-0711185

## Name and Address of Current Registered Agent:

YOUNG, ROBERT 2275 N W 79TH STREET MIAMI, FL 33147-4925 US Certificate of Status Desired: No

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

# Officer/Director Detail :

Officer/Director Detail :				
Title	SD	Title	D	
Name	YOUNG, JOHNNIE E	Name	CANTY, SUSIE	
Address	P.O. BOX 470365	Address	P.O. BOX 470365	
City-State-Zip:	MIAMI FL 33247-0354	City-State-Zip:	MIAMI FL 33247-0354	
Title	D	Title	DIRECTOR	
Name	GABRIEL, BETTY	Name	MILLER, KATIE	
Address	P.O. BOX 470365	Address	P.O. BOX 470365	
City-State-Zip:	MIAMI FL 33247-0354	City-State-Zip:	MIAMI FL 33247-0354	
Title	DIRECTOR	Title	DIRECTOR	
Name	BEASLEY, MARY	Name	YOUNG, ROBERT	
Address	P.O. BOX 470365	Address	P.O. BOX 470365	
City-State-Zip:	MIAMI FL 33247-0354	City-State-Zip:	MIAMI FL 33247-0354	
Title	DIRECTOR	Title	DIRECTOR	
Name	DAWSON, JIMMIE	Name	SMITH, RONALD	
Address	P.O. BOX 470365	Address	P.O. BOX 470365	
City-State-Zip:	MIAMI FL 33247-0354	City-State-Zip:	MIAMI FL 33247-0354	
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I hereby 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 all other like empowered.

## SIGNATURE: ROBERT YOUNG

DIRECTOR

### 04/23/2023

Electronic Signature of Signing Officer/Director Detail

Date

Date

### **Officer/Director Detail Continued :**

Title	DIRECTOR	Title	DIRECTOR
Name	HILL, ANGELA	Name	COLLINS, WILLIAM
Address	2275 N W 79TH STREET P O BOX 470365	Address	P O BOX 470365
City-State-Zip:	MIAMI FL 33147-4925	City-State-Zip:	MIAMI FL 33247-0354