

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744143

Entity Name: NEW CITY MINISTRY, INC.**Current Principal Place of Business:**7154 N UNIVERSITY DR STE 233
TAMARAC, FL 33321**Current Mailing Address:**7154 N UNIVERSITY DR STE 233
TAMARAC, FL 33321**FEI Number: 59-2471090****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MAS, JIMMY
5200 N. W. 65TH AVENUE
LAUDERHILL, FL 33319 US*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**Officer/Director Detail :**

Title	PD
Name	MAS, JIMMY
Address	5200 N. W. 65TH AVENUE
City-State-Zip:	LAUDERHILL FL 33319

Title	SD
Name	SOTO JR, ELSON
Address	10450 NW 3RD STREET
City-State-Zip:	PLANTATION FL 33324

Title	TD
Name	MAS, TERESA A
Address	5200 NW 65TH AVENUE
City-State-Zip:	LAUDERHILL FL 33319

Title	VPD
Name	LICHTMAN, ALAN
Address	6002 SW 1ST STREET
City-State-Zip:	PLANTATION FL 33317

Title	D
Name	TRAPANI, SALVATORE
Address	3211 PATRICIA CIRCLE
City-State-Zip:	E. NORRITON PA 19401

Title	D
Name	MAS, DANIEL J
Address	533 NE 3 AVE
City-State-Zip:	FT LAUDERDALE FL 33301

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: TERESA A. MAS**TREASURER****01/09/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date