### above, or on an attachment with all other like empowered. SIGNATURE: TERESA A. MAS SECRETARY/DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Entity Name: NEW CITY MINISTRY, INC. **Current Principal Place of Business:** 

7154 N UNIVERSITY DR STE 233 TAMARAC, FL 33321

**DOCUMENT# 744143** 

# **Current Mailing Address:**

7154 N UNIVERSITY DR STE 233 TAMARAC, FL 33321

# FEI Number: 59-2471090

### Name and Address of Current Registered Agent:

MAS, JIMMY 5200 N. W. 65TH AVENUE LAUDERHILL, FL 33319 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

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# **Officer/Director Detail :**

Title	PD	Title	SD
Name	MAS, JIMMY	Name	SOTO JR, ELSON
Address	5200 N. W. 65TH AVENUE	Address	10450 NW 3RD STREET
City-State-Zip:	LAUDERHILL FL 33319	City-State-Zip:	PLANTATION FL 33324
Title	ТD	Title	V PRESIDENT, D
Name	MAS, TERESA A	Name	MAS, DANIEL J
Address	5200 NW 65TH AVENUE	Address	533 NE 3 AVE
City-State-Zip:	LAUDERHILL FL 33319	City-State-Zip:	FT LAUDERDALE FL 33301
Title	DIRECTOR	Title	DIRECTOR
Tille	DIRECTOR	THE	Direction
Name	EKSTROM, JEFFREY	Name	VOGEL, RALPH
Address	3738 PICKARD ROAD	Address	500 SALEM LANE
City-State-Zip:	SINCLAIRVILLE NY 14782	City-State-Zip:	GIBSONIA PA 15044

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 02/23/2016

Date

Secretary of State CC6309449371

Date