## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0000007303

Entity Name: NEW CREATION CHRISTIAN FELLOWSHIP, INC.

## **Current Principal Place of Business:**

4565 N. PINE ISLAND RD SUNRISE, FL 33351

## **Current Mailing Address:**

PO BOX 9191 FORT LAUDERDALE, FL 33310 US

# FEI Number: 65-1087146

## Name and Address of Current Registered Agent:

WASHINGTON, DAVID 9513 NW 52 CT SUNRISE, FL 33351 US

Date

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 :**

Title	P	Title	VP
Name	WASHINGTON, DAVID JR	Name	WASHINGTON, MADELYN
Address	9513 NW 52 CT	Address	9513 NW 52CT
City-State-Zip:	SUNRISE FL 33351	City-State-Zip:	SUNRISE FL 33351
Title	TREASURER	Title	SECRETARY
Name	MONTGOMERY, SHALONDA	Name	LITTLE, TORRENCE SR.
Address	5200 SW 22ND CT	Address	7881 NW 53RD AVE
City-State-Zip:	LAUDERHILL FL 33313	City-State-Zip:	LAUDERHILL FL 33351
Title		Title	DIRECTOR
Title		Title Name	DIRECTOR PRAY, COURTNEY
Name	BELL, MARTHA		
	BELL, MARTHA PO BOX 9191	Name	PRAY, COURTNEY
Name Address	BELL, MARTHA PO BOX 9191	Name Address	PRAY, COURTNEY 889 NW 16TH AVE
Name Address City-State-Zip:	BELL, MARTHA PO BOX 9191 FORT LAUDERDALE FL 33310 DIRECTOR	Name Address City-State-Zip:	PRAY, COURTNEY 889 NW 16TH AVE FORT LAUDERDALE FL 33311
Name Address City-State-Zip: Title	BELL, MARTHA PO BOX 9191 FORT LAUDERDALE FL 33310	Name Address City-State-Zip: Title	PRAY, COURTNEY 889 NW 16TH AVE FORT LAUDERDALE FL 33311 DIRECTOR
Name Address City-State-Zip: Title Name Address	BELL, MARTHA PO BOX 9191 FORT LAUDERDALE FL 33310 DIRECTOR PRAY, WILLIAM	Name Address City-State-Zip: Title Name	PRAY, COURTNEY 889 NW 16TH AVE FORT LAUDERDALE FL 33311 DIRECTOR MONTGOMERY, LEE SR.

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: MADELYN WASHINGTON

CO-PASTOR/VP

04/11/2018

Electronic Signature of Signing Officer/Director Detail

Date