

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N31666

**Entity Name:** TABERNACLE OF THE NEW COVENANT CHRISTIAN CENTER, INC.

**FILED**  
**Mar 10, 2018**  
**Secretary of State**  
**CC4936580798**

**Current Principal Place of Business:**

603 N.W. 7TH TERRACE  
FORT LAUDERDALE, FL 33311

**Current Mailing Address:**

P.O. BOX 1043  
C/O HERBERT LEE BOWENS  
POMPANO BEACH, FL 33061

**FEI Number: 65-0129940**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BOWENS, HERBERT L  
361 N.W. 19TH COURT  
POMPANO BEACH, FL 33060 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	P/D	Title	VP/D
Name	BOWENS, HERBERT LP/D	Name	BOWENS, JOYCE AVP/D
Address	361 N.W. 19TH COURT	Address	361 NW 19TH COURT
City-State-Zip:	POMPANO BEACH FL	City-State-Zip:	POMPANO BEACH FL
Title	S/D		
Name	SMITH, LAKEISHA NS/D		
Address	1577 N. W. 7TH TERRACE		
City-State-Zip:	POMPANO BEACH FL 33063		

*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: HERBERT L. BOWENS**

**PRESIDENT /PASTOR**

**03/10/2018**

Electronic Signature of Signing Officer/Director Detail

Date