## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 730700** 

FILED Apr 30, 2007 Secretary of State

Entity Name: GOOD NEWS FELLOWSHIP CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

201 S.W. 38TH AVENUE FT LAUDERDALE, FL 33312

Current Mailing Address: New Mailing Address:

201 S.W. 38TH AVENUE FT LAUDERDALE, FL 33312

FEI Number: 23-7421538 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SUTTON, ROBERT A. JAMES R WOLFE 860 OLEANDER DR. JAMES R WOLFE 6801 NW 32 AVE

PLANTATION, FL 33317 US FT LAUDERDALE, FL 33309 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: JAMES R WOLFE 04/30/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 SUTTON, ROBERT
 Name:
 WOLFE, JAMES R

 Address:
 860 OLEANDER DR.
 Address:
 6801 NW 32 AVE

City-St-Zip: FT LAUDERDALE, FL 33317 City-St-Zip: FT LAUDERDALE, FL 33309

Title: VD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SMITH, FRANK
 Name:

 Address:
 2200 NW 30TH WAY
 Address:

 City-St-Zip:
 FT LAUDERDALE, FL 33311
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 USECHE, RUBEN
 Name:

 Address:
 8224 NW 12TH CT.
 Address:

 City-St-Zip:
 PLANTATION, FL 33322
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMES R WOLFE PD 04/30/2007