2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#730700

FILED Mar 05, 2008 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 201 S.W. 38TH AVENUE

FT LAUDERDALE, FL 33312 SUITE 205

PLANTATION, FL 33312

Current Mailing Address: New Mailing Address:

201 S.W. 38TH AVENUE P.O. BOX 121837

FT LAUDERDALE, FL 33312 FT LAUDERDALE, FL 33312

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

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

JAMES R WOLFE, JAMES R MR. 6801 NW 32 AVE WOLFE, JAMES R MR. 6801 NW 32 AVE

FT LAUDERDALE, FL 33309 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 03/05/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: WOLFE, JAMES R MR. WOLFE, JAMES R MR.

 Address:
 6801 NW 32 AVE
 Address:
 6801 NW 32 AVE

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

 Name:
 SMITH, FRANK
 Name:
 SMITH, FRANK MR.

 Address:
 2200 NW 30TH WAY
 Address:
 2200 NW 30TH WAY

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

Title: () Delete Title: TSD (X) Change () Addition USECHE, RUBEN ULRICH, RAGNHILD K MRS. Name: Name: 3200 SW 133RD TERRACE Address: 8224 NW 12TH CT. Address: City-St-Zip: PLANTATION, FL 33322 City-St-Zip: **DAVIE. FL 33330**

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

 Name:
 Name:
 POWER, FRANK MR.

 Address:
 Address:
 5800 SW 53RD TERRACE

 City-St-Zip:
 City-St-Zip:
 DAVIE, FL 33314

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 03/05/2008