


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2007 08:00 AM
Secretary of State

DOCUMENT # 742249 1. Entity Name NEWBORN HOLINESS CHURCH INC.	
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Principal Place of Business 400 N.W. 5TH. STREET POMPANO BEACH, FL 33060	Mailing Address 400 N.W. 5TH. STREET POMPANO BEACH, FL 33060
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01052007 No Chg-NP CR2E037 (4/06)

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4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BLOOMBERG, ROBERT L. 900 N.E. 172 STREET MIAMI, FL

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

000000585528
01/16/07-80016-014 70.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DANIELS, G.E.(BISHOP) 2340 N.W. 12TH. CT. POMPANO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KENDRICK, BERTHA 2201 N.W. 10TH. CT. POMPANO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DANIELS, BESSIE 2511 N.W. 3RD. ST. POMPANO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BROOKS, TERATHA D. 181 S.W. 73RD TERR. MARGATE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WESTLEY, HAROLD (ELDER) 1061 SW 8 AVENUE DEERFIELD BCH., FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE George E. Daniels Jan 8, 2007 954-956-0139
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #