

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90373 011 ****61.25

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1. Entity Name
**NEW TESTAMENT CHURCH OF GOD, INDEPENDENT,
INC.**



Principal Place of Business

**137 HIGHWAY 20
PALATKA, FL 32177**

Mailing Address

**137 HIGHWAY 20
PALATKA, FL 32177**

DO NOT WRITE IN THIS SPACE



03102008 No Chg-NP

CR2E037 (4/08)

4. FEI Number
59-2639375

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**JANET M WILLIAMS
103 GURNARD LN
FLORAHOME, FL 32140**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	PRUITT, JARROD
STREET ADDRESS	107 LYNWOOD AVE
CITY-ST-ZIP	EAST GADSDEN, AL
TITLE	VD
NAME	ADDIS, WILLIAM
STREET ADDRESS	137 HIGHWAY 20
CITY-ST-ZIP	PALATKA, FL 32177
TITLE	STD
NAME	WILLIAMS, JANET M
STREET ADDRESS	103 GURNARD LN
CITY-ST-ZIP	FLORAHOME, FL 32140
TITLE	PD
NAME	PITTMAN, WENDELL
STREET ADDRESS	137 HIGHWAY 20
CITY-ST-ZIP	PALATKA, FL 32177
TITLE	D
NAME	HUDSON, BRENDA A. <i>Engel, Brenda A.</i>
STREET ADDRESS	109 CUMBO RD
CITY-ST-ZIP	HOLLOSTER, FL 32147
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: *Janet M. Williams*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JANET M. WILLIAMS

4-13-08

Date

386-328-6047

Daytime Phone #