**NONPROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 760776

## FILED Mar 17, 1999 8:00 am Secretary of State 03-17-1999 90143 019 \*\*\*\*61.25

Corporation Name     NEW BORN CHURCH OF GOD AND TRUE HOLINESS, INC.										
Principal Place of Business Mailing Address 3295-1 NW 44TH STREET FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309			9							
				- •				•		
2. Principal Pl	ace of Business	2a. Mailing Address	¬ ~ ~			3. Date Incorporated or Qualifed 11/20/1981				
21	н _ь_	Suite, Apt. #, etc.			4. FEI Number Applied For			lied For		
Suite, Apt.	#, etc.	27			NOT APPLICABLE   Not Applica					
City & State	9	City & State	<del></del>			5. Certifcate of Status Desired		\$8.75 Additional Fee Required		
Zip	Country Zip			intry		Election Campaign Financing     Trust Fund Contribution	ncing S5.00 May Be Added to Fees			
24	25   29   30   9. Name and Address of Current Registered Agent			1		10. Name and Address of New R	egistered A			
3. Name and Address of Current Reposited Agent					Name		*		-	
WALKER, JOHN W.				82 Street Address (P.O. Box Number is Not Acceptable)						
1061 N.W. 23RD TERRACE FT. LAUDERDALE FL 33311				83						
11. (A00)	ENDALL 1E 00011			84	City	<u> </u>	FL	85 Zip C	ode	
11 Pureuant	to the provisions of Sections 617.050	2 and 617 1508. Florida Statut	es, the a	bove	named corpo	pration submits this statement for the	numose of c	hanging its	registered	
Office or F	to the provisions of Sections 617.050. egistered agent, or both, in the Stete of maniflar with, and accept the obligat	of Fiorida Such change was a	uthonzer	ז עם נ	he corporation	n's board of directors. I hereby accep	t the appoint	ment as reg	jistered	•
SIGNATURE	Signature, typed or printed name of registered agen	sent title if applicable (NOTE	Panistered	Acent	signature required	When minstating)	DATE		}	ć
12.	OFFICERS AN		13.		algination to do and	ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	RS IN 12	Š
TITLE	PD	□ DELÉTE 1.1 π		TLE			<del></del>	☐ Change	Addition	3
NAME	WALKER, JOHN W.		1.2 NA							
STREET ADDRESS	1061 NW 23RD TERR		1.3 STRE		ADDRESS					ŭ
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY-5		-ZIP			Change	Addition	è
TITLE	TD	☐ DELETE	2.1 TI					Change	Addition [	•
NAME	DENMARK, JAMES (ASST)		2.2 NAME						ł	
STREET ADDRESS	1120 011 00111 /112		1		ADDRESS					
CITY-ST-ZIP			лү- <u>s1</u>	r-ZiP			☐ Change	Addition		
TITLE	SD .		DELETE 3.1 TITLE					_ ,	_	
NAME	With the state of				ADDRESS					
STREET ADDRESS				ITY-SI	1				1	
CITY-ST-ZIP TITLE	11. BRODERDALE 12 00000	☐ DELETE	4.1 TITLE					Change	☐ Addition	
NAME	-		4, 2 NAME							
STREET ADDRESS			4.3 S	TREET	ADDRESS					
CITY-ST-ZIP			4,4 CITY-1		-ZIP					
TITLE		☐ DELETE	5.1 T.		_			Change	Addition	
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREE							
CITY-ST-ZIP		<del></del>		ITY-ST	-ZIP	· · · · · · · · · · · · · · · · · · ·		<u> </u>	- Addition	
TITLE		☐ DELETE	6.1 T					☐ Change	☐ Addition	
NAME			6.2 N							
STREET ADDRESS					ADORESS					
CITY-ST-ZIP			6.4 C	ITY-ST	-ZIP					

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13/if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: