

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007244

FILED
Jan 22, 2009
Secretary of State

Entity Name: NORTHWEST DADE CHURCH OF CHRIST, INC.

Current Principal Place of Business:

3908 NW 167TH STREET
MIAMI, FL 33054

New Principal Place of Business:

Current Mailing Address:

3908 NW 167TH STREET
MIAMI, FL 33054

New Mailing Address:

FEI Number: 65-1045487

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARTER, JAMES
3361 N.W. 214TH STREET
MIAMI GARDENS, FL 33056 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PHILLIPS, SR., SAMUEL K
Address: 2050 N.W. 115TH ST.
City-St-Zip: MIAMI, FL 33167

Title: VD () Delete
Name: WILLIAMS, EDDIE
Address: 18808 N.W. 52ND COURT
City-St-Zip: OPA LOCKA, FL 33055

Title: SD () Delete
Name: CARTER, JAMES
Address: 3361 N.W. 214TH STREET
City-St-Zip: MIAMI GARDENS, FL 33056

Title: TD () Delete
Name: HICKMAN, DWAYNE SR.
Address: 20104 N.W. 27 CIRCLE
City-St-Zip: OPA LOCKA, FL 33056

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: SAMUEL K. PHILLIPS, SR.

P

01/22/2009

Electronic Signature of Signing Officer or Director

Date