

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007303

FILED
Apr 15, 2009
Secretary of State

Entity Name: NEW CREATION CHRISTIAN FELLOWSHIP, INC.

Current Principal Place of Business:

2526 W OAKLAND PARK BLVD.
FORT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

2526 W. OAKLAND PARK BLVD.
FORT LAUDERDALE, FL 33311

New Mailing Address:

2526 W OAKLAND PARK BLVD.
FORT LAUDERDALE, FL 33311

FEI Number: 65-1087146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WASHINGTON, DAVID
95136 NW 52 CT
SUNRISE, FL 33351 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: P () Delete
Name: WASHINGTON, DAVID JR
Address: 9513 NW 52 CT
City-St-Zip: SUNRISE, FL 33351

Title: D () Delete
Name: WASHINGTON, MADELYN
Address: 9513 NW 52CT
City-St-Zip: SUNRISE, FL 33351

Title: D () Delete
Name: GROSVENOR, EDNA
Address: 5211 NW 25CT BLDG 38
City-St-Zip: LAUDERHILL, FL 33313

Title: D () Delete
Name: MONTGOMERY, SHALONDA
Address: 5200 SW 22ND CT
City-St-Zip: LAUDERHILL, FL 33313

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: MADELYN WASHINGTON

D

04/15/2009

Electronic Signature of Signing Officer or Director

Date