

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002434

FILED  
Apr 16, 2009  
Secretary of State

**Entity Name:** NEW BELIEVERS HOLINESS CHURCH, INC OF POMPANO

**Current Principal Place of Business:**

781 S. DIXIE HWY.  
POMPANO BEACH, FL 33060

**New Principal Place of Business:**

**Current Mailing Address:**

665 NW 20TH STREET  
POMPANO BEACH, FL 33060

**New Mailing Address:**

**FEI Number:** 03-0504319

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MONTGOMERY, LEILA  
665 NW 20TH ST  
POMANO BEACH, FL 33060 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: MONTGOMERY, LEILA  
Address: 665 NW 20TH ST  
City-St-Zip: POMPANO BCH, FL 33060

Title: D ( ) Delete  
Name: WASHINGTON, FRANK  
Address: 1756 N.W. 2ND COURT, SUITE 1  
City-St-Zip: MIAMI, FL 33136

Title: D ( ) Delete  
Name: MONTGOMERY, REDELL  
Address: 3400 N.W. 5TH PLACE  
City-St-Zip: FT. LAUDERDALE, FL

**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:

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: LEILA MONTGOMERY

P

04/16/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date