

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003841

FILED
Mar 09, 2009
Secretary of State

Entity Name: NOAH'S COMMUNITY CENTER, INC.

Current Principal Place of Business:

129-33 NE 167TH ST.
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

129-33 NE 167TH ST.
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 65-1101472

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SINCLAIR, DARERLEE
16010 NE 18TH PLACE
NORTH MIAMI BEACH, FL 33162 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: SINCLAIR, DARERLEE
Address: 16010 NE 18TH PLACE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D () Delete
Name: DANIEL, HILTON
Address: 4837 NE 18TH TERR.
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: D () Delete
Name: CLARK, DONAVAN
Address: 17280 NE 22ND AVE.
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: T () Delete
Name: SINCLAIR, ANDREA
Address: 7883 N. SILVERADO CIRCLE
City-St-Zip: DAVIE, FL 33024

Title: S () Delete
Name: WALTERS, PAULINE
Address: 1760 NE 160TH ST.
City-St-Zip: NORTH MIAMI BEACH, FL 33162

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:

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: DARERLEE SINCLAIR

P

03/09/2009

Electronic Signature of Signing Officer or Director

Date