

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004844

FILED
Apr 02, 2008
Secretary of State

Entity Name: NEW COVENANT FIRSTBORN OUTREACH MINISTRIES, INC.

Current Principal Place of Business:

2901 NW 46TH AVE., APT. 308
LAUDERDALE LAKES, FL 33313

New Principal Place of Business:

Current Mailing Address:

2901 NW 46TH AVE., APT. 308
LAUDERDALE LAKES, FL 33313

New Mailing Address:

FEI Number: 65-1158651

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KELLINGBECK, VAUGHN
2901 NW 46TH AVE., APT. 308
LAUDERDALE LAKES, FL 33313 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: KELLINGBECK, VAUGHN
Address: 2901 NW 46TH AVE., APT. 308
City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: V () Delete
Name: KELLINGBACK, ISOLINE
Address: 2901 NW 46TH AVE APT 308
City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: S () Delete
Name: GORDON, ONEAL
Address: 2270 NW 60TH AVE
City-St-Zip: SUNRISE, FL 33313

Title: T () Delete
Name: KELLINGBECK, KEVIN
Address: 2901 NW 46 AVE #508
City-St-Zip: FORT LAUDERDALE, 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: VAUGHN KELLINGBECK

P

04/02/2008

Electronic Signature of Signing Officer or Director

Date