

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008904

FILED
Feb 07, 2009
Secretary of State

Entity Name: CHURCH OF GOD OF THE NEW TESTAMENT INC.

Current Principal Place of Business:

1110 S.E. 1ST
BOYNTON BEACH, FL 33435 US

New Principal Place of Business:

Current Mailing Address:

241 NW 4TH AVE
DELRAY BCH, FL 33444 US

New Mailing Address:

FEI Number: 80-0005256

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOVERIA, ARNOLD
241 NW 4TH AVE
DELRAY BCH, FL 33444 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: N () Delete
Name: NOVERIA, ARNOLD REV
Address: 241 NW 4TH AVE.
City-St-Zip: DELRAY BEACH, FL 33444

Title: DO () Delete
Name: DUCKENSON, NOEL
Address: 2166 DOWSON WAY
City-St-Zip: DELRAY BEACH, FL 33444

Title: DO () Delete
Name: LURXSON, ROMELUS
Address: 1311 SPRING CIR.
City-St-Zip: BOYNTON BEACH, FL 32435

Title: MD () Delete
Name: DORSAINVIL, JOSEPH E
Address: 215 SW 2 AVE.
City-St-Zip: DELRAY BEACH, FL 33444

Title: M () Delete
Name: DORGILUS, EUGENIE
Address: 241 NW 4TH AVE.
City-St-Zip: DELRAY BEACH, FL 33444

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: ARNOLD NOVERIA

REV

02/07/2009

Electronic Signature of Signing Officer or Director

Date