

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01549

FILED
Jan 26, 2005
Secretary of State

Entity Name: CHRIST COMMUNITY CHURCH OF BROWARD, INC.

Current Principal Place of Business:

901 SE 15 STREET
POMPANO BEACH, FL 330606529

New Principal Place of Business:

Current Mailing Address:

901 SE 15 STREET
POMPANO BEACH, FL 330606529

New Mailing Address:

FEI Number: 59-2374979

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERNANDEZ, EDWARD D
901 SE 15TH STREET
POMPANO 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: HERNANDEZ, EDWARD D
Address: 3773 SW 41ST ST
City-St-Zip: HOLLYWOOD, FL 33023

Title: DV () Delete
Name: SALISBURY, ROBERT
Address: 5301 PINE TREE ROAD
City-St-Zip: POMPANO BEACH, FL 33067

Title: D () Delete
Name: BROWN, MARY
Address: 1848 TAMARIND LANE
City-St-Zip: COCONUT CREEK, FL 33063

Title: S () Delete
Name: LUDWIG, JACKIE
Address: 2220 NE 61ST COURT
City-St-Zip: FT LAUDE4RDALE, FL 33308

Title: T () Delete
Name: CONNIE, HERNANDEZ
Address: 3773 SW 41 STREET
City-St-Zip: HOLLYWOOD, FL 33023

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 for the exemption stated in Section 119.07(3)(i), 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: CONNIE HERNANDEZ

T

01/26/2005

Electronic Signature of Signing Officer or Director

Date