2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2008
Secretary of State

DOCUMENT# N02000000479

Entity Name: THE NEW MILLENNIUM SENIOR CITIZENS OF LIBERIA, INC.

Current Principal Place of Business:

2400 CHARLESTON STREET
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

PO BOX 220451
HOLLYWOOD, FL 33020

New Mailing Address:

FEI Number: 02-0590619 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, LUCY O MS
738 SOUTHWEST THIRD STREET
DANIA BEACH, FL 33004 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:	MELVIN, EDNA MRS	
Address:	533 NORTH 26TH AVE.	
City-St-Zip:	HOLLYWOOD, FL 33020	
Title:	VPD	( ) Delete
Name:	YOUNG, NETTIE MS	
Address:	2341 HOOD STREET	
City-St-Zip:	HOLLYWOOD, FL 33020	
Title:	S	( ) Delete
Name:	THOMAS, ANNIE MRS	
Address:	2239 ATLANTA STREET	
City-St-Zip:	HOLLYWOOD, FL 33020	
Title:	AS	( ) Delete
Name:	HALL, ANNIE MS	
Address:	2330 FARRAGUT STREET	
City-St-Zip:	HOLLYWOOD, FL 33020	
Title:	FS	( ) Delete
Name:	RAHMINGS, ESSIE M MS	
Address:	2256 CODY STREET	
City-St-Zip:	HOLLYWOOD, FL 33020	
Title:	TR	( ) Delete
Name:	WILLIAMS, LUCY O MS	
Address:	738 SOUTHWEST THIRD STREET	
City-St-Zip:	DANIA BEACH, FL 33004	

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:	
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: LUCY O. WILLIAMS TR 04/27/2008

Electronic Signature of Signing Officer or Director — Date