

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001166

FILED
Jan 21, 2009
Secretary of State

Entity Name: NEW CHRIST TABERNACLE MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

8400 NW 25 AVE
MIAMI, FL 33147

New Principal Place of Business:

Current Mailing Address:

POST OFFICE #472361
MIAMI, FL 33247

New Mailing Address:

FEI Number: 75-2983477

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIFFIN, MAEOLA
4350 NW 31 PLACE
MIAMI, FL 33142 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: D () Delete
Name: MARSH, HAROLD
Address: 3041 N.W. 69 TERR.
City-St-Zip: MIAMI, FL 33147

Title: D () Delete
Name: WHITE, SHIRLEY
Address: 2940 NW 68 STREET
City-St-Zip: MIAMI, FL 33147

Title: D () Delete
Name: DAVIS, JULIUS
Address: 2955 NW 176 TERR
City-St-Zip: CAROL CITY, FL 33055

Title: D () Delete
Name: EVANS, BILLY
Address: 1511 NW 41 STREET
City-St-Zip: MIAMI, FL 33142

Title: D () Delete
Name: BOSTIO, VIRGINIA
Address: 3740 NW 19TH STREET
City-St-Zip: CAROL CITY, FL 33055

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: MAEOLA GRIFFIN

RA

01/21/2009

Electronic Signature of Signing Officer or Director

Date