

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006265

FILED
Sep 08, 2004
Secretary of State

Entity Name: NEW BIRTH INDEPENDENT BAPTIST CHURCH, INC.

Current Principal Place of Business:

259 DANDURAND STREET SW
PALM BAY, FL 32908

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 110304
PALM BAY, FL 32911 4

New Mailing Address:

FEI Number: 52-2369629

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PHILISTIN, JONAS R DR.
259 DANDURAND STREET SW
PALM BAY, FL 32908

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: PHILISTIN, JONAS R DR.
Address: 259 DANDURAND STREET SW
City-St-Zip: PALM BAY, FL 32908

Title: VD () Delete
Name: PHILISTIN, DENISE G
Address: 259 DANDURAND STREET SW
City-St-Zip: PALM BAY, FL 32908

Title: SD () Delete
Name: GUILLAUME, ENIDE
Address: 4158 INVERRARY BLVD #408
City-St-Zip: LAUDERDALE, FL 33319

Title: TD () Delete
Name: STECKER, WALNER J
Address: 1092 HELENA AVE NW
City-St-Zip: PALM BAY, FL 32907

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: JONAS R. PHILISTIN

PD

09/08/2004

Electronic Signature of Signing Officer or Director

Date