

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006265

FILED
Jul 02, 2009
Secretary of State

Entity Name: NEW BIRTH INDEPENDENT BAPTIST CHURCH, INC.

Current Principal Place of Business:

2105 PALM BAY RD NE
7 & 8 W
PALM BAY, FL 32905

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 110304
PALM BAY, FL 32911

New Mailing Address:

FEI Number: 52-2369629 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PHILISTIN, JONAS R DR.
220 RIDGEMONT CIR SE
PALM BAY, FL 32909 US

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: 220 RIDGEMONT CIR SE
City-St-Zip: PALM BAY, FL 32909

Title: VD () Delete
Name: PHILISTIN, DENISE G
Address: 220 RIDGEMONT CIR SE
City-St-Zip: PALM BAY, FL 32909

Title: S () Delete
Name: PIERRE, LAFORET
Address: 486 MASTEN ST NW
City-St-Zip: PALM BAY, FL 32907

Title: T () Delete
Name: PIERRE, LAFORET
Address: 486 MASTEN ST NW
City-St-Zip: PALM BAY, FL 32907

Title: TS () Delete
Name: BELIZAIRE, LOUIS
Address: 618 ALMANSA ST NE
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:

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: JONAS R. PHILISTIN

PD

07/02/2009

Electronic Signature of Signing Officer or Director

Date