

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007229

FILED
Mar 13, 2008
Secretary of State

Entity Name: THE NORTH ROSEMARY CHRISTIAN FELLOWSHIP, INC.

Current Principal Place of Business:

600 N. CONGRESS AVE
WEST PALM BEACH, FL 33401

New Principal Place of Business:

500 N. CONGRESS AVE
WEST PALM BEACH, FL 33401

Current Mailing Address:

500 N CONGRESS AVE
APT. 193
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 02-0673622 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BOONE, RANDOLPH REV.
500 N CONGRESS AVE APT 193
WEST PALM BEACH, FL 33401 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: CD () Delete
Name: BOONE, RANDOLPH REV.
Address: 500 N CONGRESS AVE APT 193
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D () Delete
Name: BOONE, SUSAN MRS.
Address: 500 N CONGRESS AVE APT 193
City-St-Zip: WEST PALM BEACH, FL 33401

Title: TD () Delete
Name: BYRD, BETTY
Address: 706 VENIC CIRCULE
City-St-Zip: LAKEPARK, FL 33403

Title: SD () Delete
Name: HUTCHINGSON, JOE DEA.
Address: 3201 BOARDWAY APT #6
City-St-Zip: WEST PALM BEACH, FL 33407

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 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: RANDOLPH BOONE

REV.

03/13/2008

Electronic Signature of Signing Officer or Director

Date