


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2004 8:00 am
Secretary of State

03-08-2004 90038 009 ****61.25

DOCUMENT # N03000000124

1. Entity Name
FIRST BORN CHURCH COMMUNITY OUTREACH CENTER, INC.



Principal Place of Business
**612 NORTH WEST 6TH ST.
 POMPANO BEACH, FL 33060**

Mailing Address
**612 NORTH WEST 6TH ST.
 POMPANO BEACH, FL 33060**

2. Principal Place of Business
SAME

3. Mailing Address
SAME

Suite, Apt. #, etc.

City & State

Zip Country



03042004 Chg-NP CR2E037 (10/03)

4. FEI Number
57-1143521

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**JONES, ANDREW J
 1289 WEST 35 ST.
 RIVIERA BEACH, FL 33404**

7. Name and Address of New Registered Agent
 Name *SAME*
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Andrew J Jones President Director* *Andrew James Jones* *3/4/04*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
|----------------------------|--|---|---|
| TITLE D | <input type="checkbox"/> Delete NAME JONES, JACK JR. STREET ADDRESS 2925 NW 4TH ST. CITY-ST-ZIP FT. LAUDERDALE, FL 33311 | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE PD | <input type="checkbox"/> Delete NAME JONES, ANDREW J STREET ADDRESS 1289 WEST 35TH ST. CITY-ST-ZIP RIVIERA BEACH, FL 33404 | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE CD | <input type="checkbox"/> Delete NAME GATHERS, ISAAC STREET ADDRESS 259 NW 12TH CT. CITY-ST-ZIP DANIA BEACH, FL 33404 | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE CD | <input type="checkbox"/> Delete NAME MILLER, DANIEL STREET ADDRESS 2871 NW 9TH ST. CITY-ST-ZIP POMPANO BEACH, FL 33069 | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE TD | <input type="checkbox"/> Delete NAME GAINES, JAMES STREET ADDRESS 2925 NW 4TH ST. CITY-ST-ZIP FT. LAUDERDALE, FL 33311 | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE SD | <input type="checkbox"/> Delete NAME HARRIS, GLORIA STREET ADDRESS 4821 NW 18TH CT. CITY-ST-ZIP LAUDERHILL, FL 33313 | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Andrew J Jones Director* *Andrew James Jones* *3/4/04* *561-502-0563*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #