

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000466

FILED
May 01, 2006
Secretary of State

Entity Name: MAHANAIM CHRISTIAN ALLIANCE CHURCH OF FORT-LAUD., INC.

Current Principal Place of Business:

3901 N. ANDREWS AVENUE, #1
OAKLAND PARK, FL 33309

New Principal Place of Business:

Current Mailing Address:

3901 N. ANDREWS AVENUE, #1
OAKLAND PARK, FL 33309

New Mailing Address:

3701 NW 21 ST
306
LAUDERDALE LAKES, FL 33311

FEI Number: 14-1915511 **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:

CASSEUS, PREVILES REV.
3901 N. ANDREWS AVENUE, #1
OAKLAND PARK, FL 33309 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: PD () Delete
Name: CASSEUS, PREVILES REV.
Address: 1425 N.W. 5TH AVE.
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: SD () Delete
Name: ETIENNE, BONIFACE
Address: 8053 SW 7 PL.
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: TD () Delete
Name: METELUS, WILFORD
Address: 4387 N.W. 42 CT.
City-St-Zip: COCONUT CREEK, FL 33070

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: PREVILES CASSEUS

D

05/01/2006

Electronic Signature of Signing Officer or Director

Date