

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000622

FILED
Feb 15, 2004
Secretary of State**Entity Name:** NEW HORIZON CHRISTIAN FELLOWSHIP INC.**Current Principal Place of Business:**16722 S.W. 101 AVENUE
MIAMI, FL 33157**New Principal Place of Business:**17409 SOUTH DIXIE HWY
MIAMI, FL 33157**Current Mailing Address:**16722 S.W. 101 AVENUE
MIAMI, FL 33157**New Mailing Address:****FEI Number:** 54-2094792**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MARSHALL, KEITH L
16722 S.W. 101 AVENUE
MIAMI, FL 33157**Name and Address of New Registered Agent:**MARSHALL, MICHELLE F
16722 S.W. 101 AVENUE
MIAMI, FL 33157

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: MICHELLE MARSHALL

02/15/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MARSHALL, KEITH L
Address: 16722 S.W. 101 AVENUE
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: MARSHALL, MICHELLE
Address: 16722 S.W. 101 AVENUE
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: JAY, SAMONE
Address: 16722 S.W. 101 AVENUE
City-St-Zip: MIAMI, FL 33157

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MARSHALL, MICHELLE F
Address: 16722 S.W. 101 AVENUE
City-St-Zip: MIAMI, FL 33157

Title: D (X) Change () Addition
Name: MARSHALL, KEITH L
Address: 16722 S.W. 101 AVENUE
City-St-Zip: MIAMI, FL 33157

Title: D (X) Change () Addition
Name: JAY, SAMONE N
Address: 16722 S.W. 101 AVENUE
City-St-Zip: MIAMI, FL 33157

Title: D () Change (X) Addition
Name: FLETCHER, ANTOINE L
Address: 16722 S.W. 101 ST AVENUE
City-St-Zip: MIAMI, FL 33157

Title: D () Change (X) Addition
Name: FLETCHER, JACQUEZ D
Address: 16722 S.W. 101ST AVENUE
City-St-Zip: MIAMI, FL 33157

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: MICHELLE MARSHALL

D

02/15/2004

Electronic Signature of Signing Officer or Director

Date