## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000003704

FILED Apr 26, 2009 Secretary of State

Entity Name: NEW GENESIS CHRISTIAN CENTER OF WEST PALM BEACH INC.

**Current Principal Place of Business: New Principal Place of Business:** 

COCO PLUM PLAZA 11988 NORTH 42ND ROAD 2845 N MILITARY TRAIL STE 26 ROYAL PALM BEACH, FL 33411 W PALM BCH, FL 33409

**New Mailing Address: Current Mailing Address:** 

COCO PLUM PLAZA 11988 NORTH 42ND ROAD 2845 N MILITARY TRAIL STE 26 ROYAL PALM BEACH, FL 33411 W PALM BCH, FL 33409

FEI Number: 11-3001810 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS RD #221E PALM BCH GARDENS, FL 33410

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:

Date

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete BROWN, JUDY REV. DR BROWN, JUDY REV. DR Name: Name: P.O. BOX 210665 Address: 11988 NORTH 42ND ROAD Address: City-St-Zip: ROYAL PALM BEACH, FL 33421 City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: () Delete Title: (X) Change ( ) Addition JOSEPH, VALERIA REV. Name: JOSEPH, VALERIA REV. Name:

Address: P.O. BOX 210665 Address: 11988 NORTH 42ND ROAD City-St-Zip: ROYAL PALM BEACH, FL 33421 City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: ( ) Delete Title: (X) Change ( ) Addition MILLER, ROSEMARIE EVANGEL BROWN, ROSEMARIE EVANGEL Name: Name: Address: P.O. BOX 210665 Address: 11988 NORTH 42ND ROAD City-St-Zip: ROYAL PALM BEACH, FL 33421 City-St-Zip: ROYAL PALM BEACH, FL 33411

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: R BROWN D 04/26/2009