

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004679

FILED
Mar 21, 2007
Secretary of State

Entity Name: NATION'S CHOICE WORSHIP CENTER, INC.

Current Principal Place of Business:

401 N.W. 183 TERR.
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

401 N.W. 183 TERR.
MIAMI, FL 33169

New Mailing Address:

FEI Number: 26-0065938

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, ELOUISE
401 N.W. 183 TERR.
MIAMI, FL 33169 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: MILLER, ELOUISE
Address: 401 N.W. 183 TERR.
City-St-Zip: MIAMI, FL 33169

Title: SD () Delete
Name: ARSTNEK, CARMEN
Address: 5029 SW 148TH PLACE
City-St-Zip: MIAMI, FL 33185

Title: TD () Delete
Name: JAMES, BETTY
Address: 545 N. W. 77 STREET
City-St-Zip: MIAMI, FL 33150

Title: VD () Delete
Name: MILLER, WILLIAM P. SR.
Address: 401 NW 183RD TERRACE
City-St-Zip: MIAMI, FL 33169

Title: EXD () Delete
Name: RILEY, KAREEM
Address: 1690 NW 191ST STREET
City-St-Zip: MIAMI, FL 33167

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MILLER, ELOUISE
Address: 401 N.W. 183 TERR.
City-St-Zip: MIAMI GARDENS, FL 33169

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: JAMES, BETTY SUE
Address: 545 N. W. 77 STREET
City-St-Zip: MIAMI, FL 33150

Title: VD (X) Change () Addition
Name: MILLER, WILLIAM P. SR.
Address: 401 NW 183RD TERRACE
City-St-Zip: MIAMI GARDENS, FL 33169

Title: EXD (X) Change () Addition
Name: INGRAM, LENA MAE
Address: 12163 AREACA DRIVE
City-St-Zip: WELLINGTON, FL 33414

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: ELOUISE MILLER

PD

03/21/2007

Electronic Signature of Signing Officer or Director

Date