2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# N03000004679

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

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

401 N.W. 183 TERR.
MIAMI GARDENS, 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 GARDENS, 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 GARDENS, 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 SUE	
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 GARDENS, FL 33169	
Title:	EXD	( ) Delete
Name:	INGHRAM, LENA MAE	
Address:	12163 AREACA DRIVE	
City-St-Zip:	WELLINGTON, FL 33414	

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:	
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 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 04/16/2009
Electronic Signature of Signing Officer or Director — Date