

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004679

FILED  
Feb 04, 2010  
Secretary of State

**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:**

2527 OPALOCKA BLVD  
SUITE E  
OPALOCKA, FL 33054

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

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

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

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

Title: EXD  
Name: INGRAM, LENA MAE  
Address: 12163 AREACA DRIVE  
City-St-Zip: WELLINGTON, FL 33414

I hereby 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 all other like empowered.

SIGNATURE: ELOUISE MILLER

PD

02/04/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date