## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000006111

FILED May 09, 2006 Secretary of State

Entity Name: THE NEW HOLINESS CHURCH OF FLORIDA INC.

	rincipal Place of Business:	New Principal Place of Business:	
12301 SW MIAMI, FL	216 STREET 33170		
Current M	lailing Address:	New Mailing Address:	
10799 SW MIAMI, FL	<sup>7</sup> 221 STREET 33170		
ln accordan	: 56-2399496 FEI Number Applied For ( ice with s. 607.193(2)(b), F.S., the corporation I Address of Current Registered Ager	did not receive the prior notice.	)
BREWER	, BUNNY 221 STREET		
	e named entity submits this statement for e of Florida.	the purpose of changing its registered office or registered agent, or be	ooth,
SIGNATU	RE:		
	Electronic Signature of Registere	d Agent Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIREC	TOR
Title:	ELD ( ) Delete	Title: ( ) Change ( ) Addition	
Name: Address:	BREWER, BUNNY L 10799 S.W. 221 ST. MIAMI, FL 33170	Name: Address: City-St-Zip:	
Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	10799 S.W. 221 ST.	Address:	
Name: Address: City-St-Zip: Title: Name: Address:	10799 S.W. 221 ST. MIAMI, FL 33170 P ( ) Delete DANIEL, CLARA 10730 S.W. 217 ST.	Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address:	
Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: Address: Address:	10799 S.W. 221 ST. MIAMI, FL 33170  P ( ) Delete DANIEL, CLARA 10730 S.W. 217 ST. MIAMI, FL 33170  T ( ) Delete JOHNSON, CHERYL 13710 VAN BUREN ST.	Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address:	
Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	10799 S.W. 221 ST. MIAMI, FL 33170  P ( ) Delete DANIEL, CLARA 10730 S.W. 217 ST. MIAMI, FL 33170  T ( ) Delete JOHNSON, CHERYL 13710 VAN BUREN ST. MIAMI, FL 33176  AST ( ) Delete WILLIAMS, MARY 13710 VAN BUREN STREET	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 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: ANNA BREWER S 05/09/2006