2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2009
Secretary of State

DOCUMENT# N03000009796

Entity Name: NEW DIMENSIONS OF FAITH FELLOWSHIP, INC.

Current Principal Place of Business:

811 UNIVERSITY BLVD. BLDG.
1300 UNIT 104
JUPITER, FL 33458

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 32721
PALM BEACH GARDENS, FL 33420

New Mailing Address:

811 UNIVERSITY BLVD. BLDG.
1300 UNIT 104
JUPITER, FL 33458

FEI Number: 41-2063205 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ADAMS, MENYAN A
811-UNIVERSITY BLVD. BLDG.
1300 UNIT 104
JUPITER, FL 33458 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: CEO ( ) Delete
Name: ADAMS, MENYAN A
Address: 811 UNIVERSITY BLVD.
City-St-Zip: JUPITER, FL 33458

Title: V PR ( ) Delete
Name: ADAMS, ANTHONY SR.
Address: 811 UNIVERSITY BLVD.
City-St-Zip: JUPITER, FL 33458

Title: DS ( ) Delete
Name: MALCOM, FRANCES
Address: 2918 W PINE STREET
City-St-Zip: TAMPA, FL 33607

Title: D ( ) Delete
Name: NORFLEET, JOSEPH BIS
Address: 196 ATKINS ST
City-St-Zip: MERIDEN, CT 06450

Title: D ( ) Delete
Name: GODDARD, VALERIE H CHR
Address: 2511 - KNOLLWOOD STREET
City-St-Zip: TAMPA, FL 33614 HI

Title: D ( ) Delete
Name: HOBBS, TRINETTE MRS.
Address: 1355-TEMPLE BLVD
City-St-Zip: WEST PALM BEACH, FL 33412

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:

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: MENYAN A. ADAMS CEO 03/20/2009
Electronic Signature of Signing Officer or Director Date