

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009799

FILED  
Feb 22, 2008  
Secretary of State

Entity Name: RHEMA CHRISTIAN FELLOWSHIP, INC.

## Current Principal Place of Business:

4540 NW 4 STREET  
PLANTATION, FL 33317

## New Principal Place of Business:

## Current Mailing Address:

4540 NW 4 STREET  
PLANTATION, FL 33317

## New Mailing Address:

FEI Number: 90-0120083

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILSON, H IRVING  
4540 NW 4 STREET  
PLANTATION, FL 33317 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: WILSON, H IRVING  
Address: 4540 NW 4 STREET  
City-St-Zip: PLANTATION, FL 33317

Title: D ( ) Delete  
Name: WILSON, A SHERRON  
Address: 4540 NW 4 STREET  
City-St-Zip: PLANTATION, FL 33317

Title: SD ( ) Delete  
Name: DANIEL, NORMAN  
Address: 13821 CHATHAM PL  
City-St-Zip: DAVIE, FL 33325

Title: T ( ) Delete  
Name: RAPALO, WANDA  
Address: 3754 NW 107TH WAY  
City-St-Zip: SUNRISE, FL 33351

Title: D ( ) Delete  
Name: BRUNO, MERVYN  
Address: 13753 NW 10TH COURT  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D ( ) Delete  
Name: COOTE, CAROL  
Address: 400 CAROLINA AVENUE  
City-St-Zip: FT. LAUDERDALE, FL 33312

## 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: H. IRVING WILSON

PD

02/22/2008

Electronic Signature of Signing Officer or Director

Date