

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000012027

FILED
Apr 28, 2009
Secretary of State

Entity Name: NEWBIRTH COVENANT MINISTRIES CHURCH, INC.

Current Principal Place of Business:

7006 ATLANTIC BLVD.
JACKSONVILLE, FL 322118706

New Principal Place of Business:

Current Mailing Address:

7006 ATLANTIC BLVD.
JACKSONVILLE, FL 322118706

New Mailing Address:

FEI Number: 55-0889032

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARTSFIELD, GEORGE REV.
7006 ATLANTIC BLVD.
JACKSONVILLE, FL 322118706 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: HARTSFIELD, CYNTHIA
Address: 7006 ATLANTIC BLVD.
City-St-Zip: JACKSONVILLE, FL 322118706

Title: T () Delete
Name: BELL, LERNYCE
Address: 6803 W, VIRGINIA AVE
City-St-Zip: JACKSONVILLE, FL 32209

Title: S () Delete
Name: DESVE, LORETTA
Address: 1141 EAST 27TH STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: D () Delete
Name: FOWLER, SHARON
Address: 2360 KINGS RD
City-St-Zip: JACKSONVILLE, FL 32209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: DESUE, LORETTA
Address: 1141 EAST 27TH STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: D (X) Change () Addition
Name: FOWLER, SHERAN
Address: 2360 KINGS RD
City-St-Zip: JACKSONVILLE, FL 32209

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: CYNTHIA HARTSFIELD

PD

04/28/2009

Electronic Signature of Signing Officer or Director

Date