## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N13752

FILED Jul 06, 2004 Secretary of State

Entity Name: NEW WAY COVENANT MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:			New Principal Place of Business:		
2837 N.W.	•		·		
Current Mailing Address:			New Mailing Address:		
2837 N.W. 6TH ST. POMPANO BEACH, FL 33069 US					
FEI Number: 59-2658701 FEI Number Applied For ( ) FEI Number			ber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name			Name and Addres	e and Address of New Registered Agent:	
JOHNSON 1093 WYOI FORT LAU		3312 US			
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:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DT () Del MONTAGUE, JOHN 1506 NW 9TH ST POMPANO BEACH,	,	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () Del JOHNSON, RYAN 180 NW 25 AVE FORT LAUDERDAL		Address: 2638 NV	(X) Change()Addition , EUGENE V 26 ST AUDERDALE, FL 33310	
Title: Name: Address: City-St-Zip:	D () Del JOHNSON, LA JUAN 558 KATHY LANE MARGATE, FL 330	NA.	Title: D Name: MILLER, Address: 408 NW City-St-Zip: POMPAN		
Title: Name: Address: City-St-Zip:	D ( ) Del HILL, ANNETTE A 1514 N.W. 11 PLAC FORT LAUDERDAL	CE C	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EUGENE MOORE PD 07/06/2004