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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N21960 (2)

1. Corporation Name

NEW JERUSALEM HOLINESS CHURCH APOSTOLIC FAITH, I  
NC.

Principal Place of Business

Mailing Address

5126 PEMBROKE RD  
HOLLYWOOD FL 33023  
US

P O BOX 2476  
HALLANDALE FL 33008-2476  
US



3. Date Incorporated or Qualified  
08/10/1987

3a. Date of Last Report  
12/28/1994

2. Principal Place of Business

2a. Mailing Address

21

26

5233 FLETCHER STR.

4. FEI Number

65-0368770

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

MOORE, MARY V  
211 S E 10 ST  
HALLANDALE FL 33009

81

MARY V. MOORE

82

Street Address (P.O. Box Number is Not Acceptable)

5233 FLETCHER STREET

83

84

City Hollywood

FL

Zip Code

33021

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME MOORE, MARY V  
STREET ADDRESS 211 SE 10ST  
CITY - ST - ZIP HALLANDALE FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

PD MOORE, MARY V.  
5233 FLETCHER STR.  
HOLLYWOOD, FLA. 33021

☐ Change ☐ Addition

TITLE VPD ☐ DELETE

NAME CHANDLER, ANNIE M  
STREET ADDRESS 2029 NW 46 AVE APT 105 E  
CITY - ST - ZIP LAUDERHILL FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

VPD MOORE, WILLIE  
5233 FLETCHER STR.  
HOLLYWOOD, FLA 33021

☐ Change ☒ Addition

TITLE SD ☐ DELETE

NAME WIMBERLY, ANNA  
STREET ADDRESS 5509 MAYO ST  
CITY - ST - ZIP HOLLYWOOD FL

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

WIMBERLY ANNA  
5411 S.W. 19TH STREET  
HOLLYWOOD, FLA. 33023

☒ Change ☐ Addition

TITLE TD ☐ DELETE

NAME WILLIS, MONICA  
STREET ADDRESS 5717 MAYO ST  
CITY - ST - ZIP HOLLYWOOD FL

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

SD CHANDLER, ANNIE MAE  
7580 STIRLING Rd Apt  
DAVIE, FLA.

☒ Change ☐ Addition

TITLE D ☒ DELETE

NAME SHAW, JACK  
STREET ADDRESS 6151 EATON STREET  
CITY - ST - ZIP HOLLYWOOD FL

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

WILLIS, MONICA  
5836 MAYO ST.  
HOLLYWOOD, FLA. 33021

☒ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARY V. MOORE

Date

7-24-96

Daytime Phone #

962-2931

CR2E037 (12/95)