

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31666

FILED
Feb 20, 2009
Secretary of State

Entity Name: TABERNACLE OF THE NEW COVENANT CHRISTIAN CENTER, INC.

Current Principal Place of Business:

2600 HAMMONDVILLE RD
SUITE 1 & 2
POMPANO BEACH, FL 33069 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1043
C/O HERBERT LEE BOWENS
POMPANO BEACH, FL 33061

New Mailing Address:

FEI Number: 65-0129940

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOWENS, HERBERT LEE
361 N.W. 19TH COURT
POMPANO BEACH, FL 33060 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: BOWENS, HERBERT LEE,
Address: 361 N.W. 19TH COURT
City-St-Zip: POMPANO BEACH, FL

Title: VD () Delete
Name: BOWENS, JOYCE A
Address: 361 NW 19TH COURT
City-St-Zip: POMPANO BEACH, FL

Title: SD () Delete
Name: CARINA-MULKEY, DURHAM
Address: 770 SW 7TH ST APT W
City-St-Zip: POMPANO BEACH, FL 33060

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:

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: HERBERT L. BOWENS

PD

02/20/2009

Electronic Signature of Signing Officer or Director

Date