

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31962

FILED
Jan 06, 2006
Secretary of State

Entity Name: COMMUNITY WORSHIP CENTER, INC.

Current Principal Place of Business:

6230 NW 17TH STREET
SUNRISE, FL 33313 US

New Principal Place of Business:

884 SW 27TH AVENUE
FT. LAUDERDALE, FL 33312 US

Current Mailing Address:

6230 NW 17TH STREET
SUNRISE, FL 33313 US

New Mailing Address:

FEI Number: 65-0120432 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

REID, BYRON
7500 NW 14TH STREET
PLANTATION, FL 33313 US

Name and Address of New Registered Agent:

BYRON REID
6230 NW 17TH STREET
SUNRISE, FL 33313 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: BYRON REID

01/06/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: REID, BYRON,
Address: 6230 NW 17 STREET
City-St-Zip: PLANTATION, FL 33313

Title: SD () Delete
Name: LINTON, SYLVIA J
Address: 1700 NW 58TH TERRACE APT 2H
City-St-Zip: SUNRISE, FL 33068

Title: T () Delete
Name: REID, LOLETA B
Address: 6230 NW 17 STREET
City-St-Zip: SUNRISE, FL 33313

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: REID, BYRON
Address: 6230 NW 17 STREET
City-St-Zip: PLANTATION, FL 33313 US

Title: VD (X) Change () Addition
Name: GILLIARD, RODNEY
Address: 2921 NW 8TH STREET
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: VD (X) Change () Addition
Name: REID, LOLETA B
Address: 6230 NW 17 STREET
City-St-Zip: SUNRISE, FL 33313

Title: TD () Change (X) Addition
Name: BARRETT, LINDELL
Address: 10422 NW 24TH PLACE, APT 107
City-St-Zip: SUNRISE,, FL 33322 US

Title: SD () Change (X) Addition
Name: DOOLAM, MARCIA
Address: 8654 WINDSOR DRIVE
City-St-Zip: MIRAMAR, FL 33329 US

I hereby certify that the information supplied with this filing does not qualify for the 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: BYRON REID

PD

01/06/2006

Electronic Signature of Signing Officer or Director

Date