2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N31962

Entity Name: COMMUNITY WORSHIP CENTER, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

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:

BYRON REID
6230 NW 17TH STREET
SUNRISE, FL 33313 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:	REID, BYRON	
Address:	6230 NW 17 STREET	
City-St-Zip:	PLANTATION, FL 33313 US	
Title:	VD	( ) Delete
Name:	GILLIARD, RODNEY	
Address:	2921 NW 8TH STREET	
City-St-Zip:	POMPANO BEACH, FL 33069 US	
Title:	VD	( ) Delete
Name:	REID, LOLETA B	
Address:	6230 NW 17 STREET	
City-St-Zip:	SUNRISE, FL 33313	
Title:	TD	( ) Delete
Name:	BARRETT, LINDELL	
Address:	10422 NW 24TH PLACE, APT 107	
City-St-Zip:	SUNRISE,, FL 33322 US	
Title:	SD	( ) Delete
Name:	DOOLAM, MARCIA	
Address:	8654 WINDSOR DRIVE	
City-St-Zip:	MIRAMAR, FL 33329 US	

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:	
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: BYRON REID P 04/30/2009

Electronic Signature of Signing Officer or Director — Date