


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90136 011 ****61.25

DOCUMENT # N37579
 1. Entity Name
NEW CREATION BAPTIST CHURCH OF CHRIST, INC.



Principal Place of Business Mailing Address
4001 NORTH DIXIE HIGHWAY **PO BOX 491533**
POMPANO BEACH FL 33064 **FT LAUDERDALE FL 39349**



2. Principal Place of Business - No P.O. Box # 3. Mailing Address
 Suite, Apt. #, etc. *P.O. Box 491533*
Ft. Lauderdale, FL 33349
 Suite, Apt. #, etc.

1st MOORE CR2E037 (10/07)

City & State City & State
 City & State City & State

4. FEI Number **65-0199390** Applied For
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
HOLMES, ROBERT
1577 NW 7TH AVE
POMPANO BEACH FL 33060

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25
Due By: May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	WILLIAMS, NORBERT C	
STREET ADDRESS	5400 NW 64TH TERRACE	
CITY-ST-ZIP	LAUDERHILL FL 33319	
TITLE	TD	<input type="checkbox"/> Delete
NAME	BRYANT, EDWARD	
STREET ADDRESS	8055 LEITNER DRIVE WEST	
CITY-ST-ZIP	CORAL SPRINGS FL 33067	
TITLE	D	<input type="checkbox"/> Delete
NAME	DESHAZOR, ANTHONY	
STREET ADDRESS	3465 NW 33 ST	
CITY-ST-ZIP	LAUDERDALE LAKES FL 33312	
TITLE	PD	<input type="checkbox"/> Delete
NAME	HOLMES, ROBERT	
STREET ADDRESS	1577 NW 7TH AVE	
CITY-ST-ZIP	POMPANO BCH FL 33060	
TITLE	D	<input type="checkbox"/> Delete
NAME	FLUELLEN, EARL S	
STREET ADDRESS	3831 NW 6TH STREET	
CITY-ST-ZIP	FORT LAUDERDALE FL 33311	
TITLE	D	<input type="checkbox"/> Delete
NAME	STERLING, BYRON	
STREET ADDRESS	1412 NW 11TH CT	
CITY-ST-ZIP	FORT LAUDERDALE FL 33311	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<i>P Scott, Michael J.</i>	
STREET ADDRESS	<i>P.O. Box 491533</i>	
CITY-ST-ZIP	<i>Ft. Lauderdale, FL 33349</i>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Robert Holmes - Robert Holmes* *04-14-08* *954-943-7465*