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Jan 20 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N45219 (5)
1. Corporation Name
NEW COMMUNITY CHURCH OF THE PALM BEACHES, INC.

Principal Place of Business Mailing Address
12230 W FOREST HILL BLVD
SUITE 200
WELLINGTON FL 33414
US

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country 29 Zip 30 Country

3. Date Incorporated or Qualified
09/19/1991
4. FEI Number 65-0226878
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
7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
ROSS, RANDY
1175 LONGLEA TERR
WELLINGTON FL 33414
10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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
TITLE PD ☐ DELETE
NAME ROSS, RANDY
STREET ADDRESS 1175 LONGLEA TERR
CITY-ST-ZIP WELLINGTON FL
TITLE VD ☒ DELETE
NAME BLACKWOOD, GLENN
STREET ADDRESS 3480 AMBASSADOR RD
CITY-ST-ZIP WELLINGTON FL
TITLE VD ☐ DELETE
NAME NEAL, RICK
STREET ADDRESS 15750 ROLLING MEADOW CIRCLE
CITY-ST-ZIP WELLINGTON FL
TITLE ST ☐ DELETE
NAME BROWNING, DAVE
STREET ADDRESS 3056 D ROAD
CITY-ST-ZIP LOXAHATCHEE FL
TITLE T ☐ DELETE
NAME PETERSON, JOHN
STREET ADDRESS 13734 CALLINGTON DR
CITY-ST-ZIP WELLINGTON FL
TITLE T ☐ DELETE
NAME JOHNSON, JOHN
STREET ADDRESS 529 OLD COUNTRY RD.
CITY-ST-ZIP WELLINGTON FL
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 in an attachment with an address.

SIGNATURE: *[Signature]* 1/6/98 561-793-6889

CR2E037 (10/97)