

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46159

FILED
Feb 02, 2008
Secretary of State

Entity Name: NEW TESTAMENT ASSEMBLY, INC.

Current Principal Place of Business:

5 BARRY ROAD
WEST PARK, FL 33023 US

New Principal Place of Business:

Current Mailing Address:

7941 KISMET STREET
MIRAMAR, FL 33023 US

New Mailing Address:

FEI Number: 65-0338645

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLNESS, RAYNESS
7941 KISMET STREET
HOLLYWOOD, FL 33023 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: D () Delete
Name: MATTIS, HORTENSE M REV
Address: 5 BARRY ROAD
City-St-Zip: WEST PARK, FL 33023

Title: D () Delete
Name: PERCIVAL, HOLNESS A REV.
Address: 7941 KISMET STREET
City-St-Zip: MIRAMAR, FL 33023

Title: VP/S () Delete
Name: RAYNESS, HOLNESS REV.
Address: 7941 KISMET STREET.
City-St-Zip: MIRAMAR, FL 33023

Title: D () Delete
Name: MURRAY, DESMOND B DR.
Address: 3671 HIGH PINE DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: O () Delete
Name: GALLOWAY, ANGELA H O
Address: 4441 NW 16TH STREET, # 104
City-St-Zip: LAUDERHILL, FL 33313 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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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: RAYNESS HOLNESS

VP/S

02/02/2008

Electronic Signature of Signing Officer or Director

Date