

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N46194

**FILED**  
**Mar 04, 2010**  
**Secretary of State**

**Entity Name:** NATIONWIDE HOLINESS CHURCH OF BROTHERLY LOVE INC.

**Current Principal Place of Business:**

2260 NW 117TH ST  
MIAMI, FL 33167 US

**New Principal Place of Business:**

**Current Mailing Address:**

2260 NW 117TH ST  
MIAMI, FL 33167 US

**New Mailing Address:**

**FEI Number:** 65-0305535

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILSON, REV. JOHN  
2260 NW 17TH AVENUE  
MIAMI, FL 33167 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  
Name: WILSON, JOHN REV  
Address: 2260 NW 117TH STREET  
City-St-Zip: MIAMI, FL 33167

Title: SD  
Name: WILSON, MAMIE  
Address: 11434 NW 22ND AVE.  
City-St-Zip: MIAMI, FL 33168 US

Title: TD  
Name: WORTHAM, WALTER  
Address: 11434 NW 22ND AVE.  
City-St-Zip: MIAMI, FL 33168 US

Title: VPD  
Name: WILSON, YVONNE  
Address: 11402 NW 22ND AVENUE  
City-St-Zip: MIAMI, FL 33168 US

Title: VPD  
Name: WILSON, MAMIE  
Address: 9009 NW 21ST AVE  
City-St-Zip: MIAMI, FL 33147

Title: TRUD  
Name: WILSON, MAMIE  
Address: 9009 NW 21ST AVE  
City-St-Zip: MIAMI, FL 33147

I hereby 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 all other like empowered.

SIGNATURE: MAMIE WILSON

TRUD

03/04/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date