


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 27, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N93000003002</b> 1. Entity Name <b>NEW CREATION CHRISTIAN CENTER, INC.</b>	
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Principal Place of Business <b>301 N 11TH ST. PALATKA, FL 32177</b>	Mailing Address <b>P.O. BOX 1691 PALATKA, FL 32178</b>
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07062006 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>59-3237869</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent  <b>JACKSON, ELIJAH T 1210 N. 17TH ST. PALATKA, FL 32177</b>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reconstituting) DATE \_\_\_\_\_

<b>Filing Fee is \$81.25 Due by September 6, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	U00000572479 07/27/06-80005-021 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VP BADIE, MELODY 208-FOURTH ST E PALATKA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TDT GREEN, GEORGIA 408 N 16TH ST., APT. B-13 PALATKA, FL 32177
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SPD BARTLEY, JOANN 900 N 15TH ST PALATKA, FL 32177
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JACKSON, ELIJAH T P.O. BOX 1691 PALATKA, FL 32178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1VP JACKSON, ANNIE 1210 N. 17TH STREET PALATKA, FL 32177
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:**  **7-24-06**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR