

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000831

FILED
Apr 29, 2005
Secretary of State

Entity Name: NEW HORIZEIN CHURCH OF GOD IN CHRIST INC.

Current Principal Place of Business:

NEW HORIZEIN COGIC
804 22ND AVE WEST
BRADENTON, FL 34205 US

New Principal Place of Business:

Current Mailing Address:

NEW HORIZEIN COGIC
804 22ND AVE WEST
BRADENTON, FL 34205 US

New Mailing Address:

FEI Number: 65-0353911

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCAVELLA, DAVID ELDER
6309 8TH CT EAST
BRADENTON, FL 34203 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: DP () Delete
Name: SCAVELLA, DAVID ELDER
Address: 6309 8TH CT EAST
City-St-Zip: BRADENTON, FL 34203

Title: D () Delete
Name: SCAVELLA, LARVERN
Address: 6309 8TH CT EAST
City-St-Zip: BRADENTON, FL 34203

Title: D () Delete
Name: WOODS, VALARY
Address: 415 60TH AVE. E
City-St-Zip: BRADENTON, FL 34203

Title: D () Delete
Name: WILLIAMS, GWENDOLYN
Address: 5310 CARMEN AVE.
City-St-Zip: SARASOTA, FL 34235

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: () Change () Addition
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 for the exemption stated in Section 119.07(3)(i), 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: DAVID H. SCAVELLA

PAST

04/29/2005

Electronic Signature of Signing Officer or Director

Date