## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED May 06, 2005 8:00 am Secretary of State

DOCUMENT # N9400005219,  1. Entity Name NEW RIVER BAPTIST CHURCH OF FORT LAUDERDALE, INC.								05-06-2		-		
Principal Place of Business 18500 GRIFFIN ROAD FT. LAUDERDALE, FL 33332			Mailing Address 18500 GRIFFIN ROAD FT. LAUDERDALE, FL 33332									
2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.	·····	<b>─</b>   0	4192005	Chg-NP	c	R2E037	(10/03)		
City & State			City & State		4.	FEI Numbe 65-052	7958				plied For t Applicable	
Zip Country		Zip Cou		ntry	5. Certificate of S			red		8.75 Add e Require		
Name and Address of Current Registered Agent						· · · · · · · · · · · · · · · · · · ·		Address of N	lew Regis	stered Ag	ent	
WEBB, RIG	CHARD R				Name Eu	unio	<u>ce 1</u>	ζονο				
5130 S.W. 186 AVE. FT. LAUDERDALE, FL 33332					Street Addre	ess (P.O.	Box Numbe	r is Not Accer	ptable) チャモ.			
FI. LAUDE	ERDALE,	FL 33332		Ì				· <u>D</u> —				
					City Southwest RANches FL 33332							
8. The above	named entitions of regist	y submits this statement for	the purpose of changing its r	egistere	d office or reg	gistered a	gent, or bot	h, in the State	of Florida	a. I am fan	niliar with,	and accept
SIGNATURE Signature, typod or printed name of registand agent and title if goglicable. (NOTE: Registand Agent signature required when reinstating)												
	Ognation, typeo	or printed resident in the second segment	TO THE PARTY OF TH	magraziou	vident signature re	actualism when	reactivate (g)		1	J DATE	1	
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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 eath; 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 ell other like empowered.

SIGNATURE: Signature and types of printed name of signang officer on direction Date Date Design Print Print 8