


FILE NOW: FILING FEE IS \$61.25

FILED

Sep 12 1997 8:00am
Secretary of State

| | | |
|--|---|---|
| NONPROFIT CORPORATION ANNUAL REPORT 1997 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
|--|---|---|

DOCUMENT # **N95000000489 (3)**

1. Corporation Name

**NEW BEGINNING MISSIONARY BAPTIST CHURCH OF POMPA
NO BEACH, INC.**

Principal Place of Business

Mailing Address

1400 N.W. 18TH ST.
POMPANO BEACH FL 33069

REV. HOOVER ATKINS
2720 SOMERSET DR., #W-107
LAUDERDALE LAKES FL 33311-9414



| | | | | | |
|--------------------------------|------------|----------------------------|------------|---|--------------------------------|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified | 3a. Date of Last Report |
| 21 1400 NW. 18th St. | | 26 2720 SOMERSET DR #W.107 | | 01/27/1995 | 05/22/1996 |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 4. FEI Number | Applied For |
| 22 NEW BEGINNING M.B.C. | | 27 Ft. LAUDERDALE FL 33311 | | 65-0543637 | Not Applicable |
| City & State | | City & State | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| 23 POMPANO BEACH FL. | | 28 | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip | Country | Zip | Country | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes | |
| 24 33069 | 25 Broward | 29 33311 | 30 Broward | Yes No | |

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BELL, REV. W.C.
3430 N.W. 2ND ST.
FT. LAUDERDALE FL 33311

| | |
|---|-------------------|
| 81 Name | REV. W.C. BELL |
| 82 Street Address (P.O. Box Number is Not Acceptable) | 3430 N.W. 2ND ST |
| 83 | |
| 84 City | Ft. LAUDERDALE FL |
| 85 Zip Code | 33311 |

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE REV. W.C. BELL PASTOR REV. W.C. BELL
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE JULY 16 / 1997

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|---------------------------|---|--------------------------|
| TITLE | NAME | 1.1 TITLE | PASTOR |
| NAME | ATKINS, REV. HOOVER | 1.2 NAME | REV. HOOVER ATKINS |
| STREET ADDRESS | 2720 SOMMERSET DR., #W-7 | 1.3 STREET ADDRESS | 2720 SOMERSET DR # W-107 |
| CITY-ST-ZIP | LAUDERDALE LAKES FL 33311 | 1.4 CITY-ST-ZIP | |
| TITLE | NAME | 2.1 TITLE | SD. |
| NAME | THOMPSON, WILLIE MAE | 2.2 NAME | WILLIE MAE THOMPSON |
| STREET ADDRESS | 113 N.W. 7TH CT. | 2.3 STREET ADDRESS | 113 N.W. 7th Ct. |
| CITY-ST-ZIP | DEERFIELD BEACH FL 33441 | 2.4 CITY-ST-ZIP | DEERFIELD BEACH FL 33441 |
| TITLE | NAME | 3.1 TITLE | TD. |
| NAME | MADISON, MAUDE | 3.2 NAME | MAUDE MADISON |
| STREET ADDRESS | 490 N.W. 3RD AVE. | 3.3 STREET ADDRESS | 490 N.W. 3RD. AVE |
| CITY-ST-ZIP | DEERFIELD BEACH FL 33441 | 3.4 CITY-ST-ZIP | DEERFIELD BEACH FL 33441 |
| TITLE | NAME | 4.1 TITLE | |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | NAME | 5.1 TITLE | |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | NAME | 6.1 TITLE | |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE REV. W.C. BELL REV. W.C. BELL 1997

CR2E037 (9/96)