

# 2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT #N95000003449

1. Entity Name  
HOLINESS BORN AGAIN CHURCH OF JESUS CHRIST  
(APOSTOLIC), INCORPORATED



Principal Place of Business  
6452 PEMBROKE RD  
HOLLYWOOD, FL 33021 US

Mailing Address  
1503 SW 161 AVENUE  
PEMBROKE PINES, FL 33027

**FILED**  
**Jun 15, 2005 8:00 A.M.**  
**Secretary of State**



06072005 Chg-NP

CR2E037 (10/03)

05

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number  
65-0596529

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

JAMES, DAFTON  
1503 SW 161 AVENUE  
PEMBROKE PINES, FL 33027

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make check payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME JAMES, DAFTON  
STREET ADDRESS 1503 SW 161 AVE  
CITY-ST-ZIP PEMBROKE PINES, FL 33027

TITLE SD ☐ Delete  
NAME JAMES, PAULINE  
STREET ADDRESS 1503 SW 161 AVE  
CITY-ST-ZIP PEMBROKE PINES, FL 33027

TITLE D ☐ Delete  
NAME EULA, NELSON  
STREET ADDRESS 1420 NW 28th AVE  
CITY-ST-ZIP FORT LAUDERDALE, FL 33311

TITLE D ☒ Delete  
NAME MILLER, SAMUEL  
STREET ADDRESS 6636 ARBOR DRIVE  
CITY-ST-ZIP HOLLYWOOD, FL 33023

TITLE D ☒ Delete  
NAME LEWIS, JABEZ  
STREET ADDRESS 2401 SCOTTS LEVEL RD  
CITY-ST-ZIP BALTIMORE, MD

TITLE DT ☐ Delete  
NAME ALTIMON, NEPAUL  
STREET ADDRESS 6444 FUNSTON STREET  
CITY-ST-ZIP HOLLYWOOD, FL 33023

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE T ☐ Change ☒ Addition  
NAME BROWN, CLAUDETTE  
STREET ADDRESS 1503 NW 161 AVE  
CITY-ST-ZIP PEMBROKE PINES, FL 33027

TITLE D ☐ Change ☒ Addition  
NAME SALOM, CASWELL  
STREET ADDRESS 6452 Pembroke RD  
CITY-ST-ZIP HOLLYWOOD FL 33021

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 3961 NW 34th AVE  
CITY-ST-ZIP LAUDERDALE LAKES, FL 33309

TITLE D ☐ Change ☒ Addition  
NAME BOWEN, CHRISTINE  
STREET ADDRESS 6575 W.Oakland Park Blvd. #216  
CITY-ST-ZIP LAUDERHILL FL 33313

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 900056308449  
CITY-ST-ZIP 06/17/05--01062--015 \*\*61.25

12. I 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 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: Eula Nelson  
Director

6/13/05

Date

954-735-3523

Daytime Phone #

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