

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2006 8:00 am
Secretary of State

04-19-2006 90082 007 ****61.25

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
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 65-0596529	Applied For ☐ Not Applicable
Zip	Country	Zip	Country



01062006 Chg-NP CR2E037 (11/05)

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	
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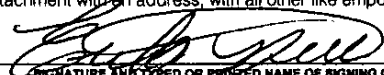
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD JAMES, DAFTON 1503 SW 161 AVE PEMBROKE PINES, FL 33027 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD JAMES, PAULINE 1503 SW 161 AVE PEMBROKE PINES, FL 33027 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D EULA, NELSON 3961 NW 34TH AVENUE LAUDERDALE LAKES, FL 33309 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T BROWN, CLAUDETTE 1503 NW 161ST AVENUE PEMBORKE PINES, FL 33027 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SALOM, CASWELL 6452 PEMBROKE ROAD HOLLYWOOD, FL 33021 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ALTIMON, NEPAUL 6444 FUNSTON STREET HOLLYWOOD, FL 33023 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

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:  **4-17-06 954-309-1280**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #