

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002976

FILED  
Apr 22, 2007  
Secretary of State

Entity Name: NEW LIFE PENTECOSTAL CHURCH OF GOD, INC.

**Current Principal Place of Business:**

1130 NW 119 ST  
MIAMI, FL 33168

**New Principal Place of Business:**

**Current Mailing Address:**

1220 N.W. 116 TERRACE  
MIAMI, FL 33167

**New Mailing Address:**

FEI Number: 65-0764614      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

BAKER, JOANNE  
1220 N.W. 116 TERRACE  
MIAMI, FL 33167      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: PD ( ) Delete  
Name: BAKER, JOANNE  
Address: 1220 NW 116TH TERR.  
City-St-Zip: MIAMI, FL 33167

Title: VTD ( ) Delete  
Name: BAKER, GENE P  
Address: 1220 NW 116TH TERR.  
City-St-Zip: MIAMI, FL 33167

Title: D ( ) Delete  
Name: JACKSON, BEULAH A  
Address: 13134 PORT SAID RD.  
City-St-Zip: OPA-LOCKA, FL 33054

Title: D ( ) Delete  
Name: BAKER, KENYA L  
Address: 1220 NW 116TH TERR.  
City-St-Zip: MIAMI, FL 33167

Title: S (X) Delete  
Name: BAKER, TAMARA  
Address: 1220 NW 116 TR  
City-St-Zip: MIAMI, FL 33167

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: S (X) Change ( ) Addition  
Name: BAKER, TAMARA L  
Address: 1220 NW 116TH TERR  
City-St-Zip: MIAMI, FL 33167

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 Chapter 119, 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: GENE P. BAKER

VTD

04/22/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date