# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 30, 2009**
**Secretary of State**

DOCUMENT# N97000004139

**Entity Name:** NEW WAY FELLOWSHIP COMMUNITY DEVELOPMENT CORPORATION, INC.

**Current Principal Place of Business:**

16800 NW 22ND AVE.
MIAMI, FL 33056

**New Principal Place of Business:**

**Current Mailing Address:**

16800 NW 22ND AVE.
MIAMI, FL 33056

**New Mailing Address:**

**FEI Number: 65-0781757** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

BILLY, BASKIN
16800 NW 22ND AVE.
MIAMI, FL 33056 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: D ( ) Delete
Name: BALDWIN, GEORGE
Address: 10370 SW 149TH TERR
City-St-Zip: MIAMI, FL 33176

Title: D ( ) Delete
Name: BASKIN, CATHERINE
Address: 14531 ARDUCH PL
City-St-Zip: MIAMI, FL 33056

Title: TD ( ) Delete
Name: WOODS, CLARENCE
Address: 1427 NW 159 LANE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: S ( ) Delete
Name: FORD, LARUE
Address: 19035 NW 54 PL
City-St-Zip: MIAMI, FL 33055

Title: PD ( ) Delete
Name: BASKIN, BILLY
Address: 14531 ARDUCH PL
City-St-Zip: MIAMI, FL 33016

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

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

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

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

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 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: BILLY BASKIN PD 04/30/2009

Electronic Signature of Signing Officer or Director — Date