2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002854

FILED Mar 16, 2009 Secretary of State

Entity Name: THE NEW PALM RIVER CHURCH OF GOD IN CHRIST, INC.

Current Principal Place of Business:			New Principal Pl	New Principal Place of Business:	
1304 S. 58 TAMPA, F					
Current Mailing Address:			New Mailing Add	New Mailing Address:	
1416 HOLLEMAN DR VALRICO, FL 33594				1416 HOLLEMAN DR VALRICO, FL 33596	
FEI Number	r: 38-3693330	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Addre	Name and Address of New Registered Agent:	
FOWLER, WILLIE L JR. 1416 HOLLEMAN DRIVE VALRICO, FL 33594 US			1416 HOLLEMAN	FOWLER, WILLIE L JR. 1416 HOLLEMAN DRIVE VALRICO, FL 33596 US	
	e named entity te of Florida.	submits this statement for the	ourpose of changing its regis	tered office or registered agent, or both,	
SIGNATURE:				03/16/2009	
	Electro	nic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	FOWLER, WII 1416 HOLLEN	MAN DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STREET, GEO	58TH STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	JORDEN, DOI 12022 JACKS		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	JORDEN, TAT 12022 JACKS		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	STEPHENS, E	58TH STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
City-St-Zip:			Title:	() Change () Addition	

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: WILLIE L. FOWLER, JR DP 03/16/2009