

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90032 020 ****61.25

DOCUMENT # N98000006887



1. Entity Name
THE NEW CITY OF DAVID PENTACOSTAL CHURCH, INC.

Principal Place of Business
811 N.W. 1ST AVENUE
STE 811
FORT LAUDERDALE, FL 33311

Mailing Address
921 N.E. 50 STREET
POMPANO BEACH, FL 33064

94058181



2. Principal Place of Business

811 NW 1st Ave

Suite, Apt. #, etc.

811 NW 1st Ave

City & State

Fort Lauderdale, FL

Zip

33311

Country

Broward

3. Mailing Address

921 NE 50th street

Suite, Apt. #, etc.

921 NE 50th street

City & State

33064

Zip

Broward

Country

Broward

02242004 Chg-NP CR2E037 (10/03)

4. FEI Number
65-0878961

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Paul GRACIEUSE
C/O GRACIEUSE
921 N.E. 50TH STREET
POMPANO BEACH, FL 33069

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

Filing Fee is \$65.25
Due by May 1, 2004

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	DP my name is	<input type="checkbox"/> Delete
NAME	GRACIEUSE	
STREET ADDRESS	921 N.E. 50TH STREET	
CITY-ST-ZIP	POMPANO BEACH, FL 33069	
TITLE	MD	<input type="checkbox"/> Delete
NAME	JORDAN, MARY F	
STREET ADDRESS	710 SW 14TH CT	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441	
TITLE	DST	<input type="checkbox"/> Delete
NAME	FRANCOIS, DANIEL JEAN	
STREET ADDRESS	921 N.E. 50TH STREET	
CITY-ST-ZIP	POMPANO BEACH, FL 33069	
TITLE	M	<input type="checkbox"/> Delete
NAME	DEWITT, RICHARD	
STREET ADDRESS	6600 LAKESHORE DR	
CITY-ST-ZIP	POMPANO BEACH, FL 33063	
TITLE	MWP	<input type="checkbox"/> Delete
NAME	PEVER, DANIEL REV	
STREET ADDRESS	4031 NE 12 TER	
CITY-ST-ZIP	POMPANO BEACH, FL 33064	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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:

Gracieuse Saintel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-4-04

Date

Daytime Phone #

(954) 531-6625