

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000933

FILED
Apr 07, 2009
Secretary of State

Entity Name: NEW BIRTH CHURCH INC.

Current Principal Place of Business:

536 CIRCLE DRIVE
QUINCY, FL 32351

New Principal Place of Business:

Current Mailing Address:

536 CIRCLE DRIVE
QUINCY, FL 32351

New Mailing Address:

FEI Number: 59-3576874

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RICHARDSON, EDDIE L
536 CIRCLE DRIVE
QUINCY, FL 32351 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: RICHARDSON, ELLA
Address: 536 CIRCLE DR
City-St-Zip: QUINCY, FL 32351

Title: D () Delete
Name: RICHARDSON, GEORGIE MAE
Address: 1954 KING ST
City-St-Zip: QUINCY, FL 32351

Title: D () Delete
Name: SANDERS, CHARLIE
Address: 2360 HUTCHINSON FERRY RD
City-St-Zip: QUINCY, FL 32352

Title: C () Delete
Name: RICHARDSON, EDDIE
Address: 536 CIRCLE DRIVE
City-St-Zip: QUINCY, FL 32351

Title: D () Delete
Name: OUTLEY, DEBRA
Address: 112 SERENITY LN
City-St-Zip: QUINCY, FL 32351

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: EDDIE L. RICHARDSON

MR.

04/07/2009

Electronic Signature of Signing Officer or Director

Date