

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2005 08:00 AM
Secretary of State

DOCUMENT # N99000001467	
1. Entity Name NEW WINE MINISTRIES CHURCH INTERNATIONAL INC.	
Principal Place of Business 6151 MIRAMAR PARKWAY STE #200 MIRAMAR, FL 33023	Mailing Address 6151 MIRAMAR PARKWAY STE #200 MIRAMAR, FL 33023



03072005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0909864	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MARCH, ANTHONY J 6361 SW 35TH ST MIRAMAR, FL 33023	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MARCH, ANTHONY J 6361 SW 35TH STREET MIRAMAR, FL 33023
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VSD MARCH, VALARIE 6361 SW 35TH STREET MIRAMAR, FL 33023
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T WILSON, LASHUNDA 6809 MIRAMAR PARKWAY MIRAMAR, FL 33023
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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03/24/05-80044-007 70.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Valerie T. March Vice president 3/24/05 954-986-7628
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #