## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000003447

FILED Apr 30, 2007 Secretary of State

Entity Name: CHURCH OF THE BRIDE OF JESUS CHRIST, INC

Current Principal Place of Business: New Principal Place of Business:

5047 SUMMIT BLVD

WEST PALM BEACH, FL 33417

Current Mailing Address: New Mailing Address:

5908 ITHACA CIRC WEST
LAKE WORTH, FL 33463

15259 OKEECHOBEE BLVD
LOXAHATCHEE, FL 33470

FEI Number: 31-1671144 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

THEODORE, NOE THEODORE, NOE

5908 ITHACA CIR W 15259 OKEECHOBEE BLVD LOXAHATCHEE, FL 33470 US

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: NOE THEODORE 04/30/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P/D
 ( ) Delete
 Title:
 P/D
 (X) Change ( ) Addition

 Name:
 NOE, THEODORE
 Name:
 NOE, THEODORE

 Address:
 5908 ITHACA CIRC W
 Address:
 15259 OKEECHOBEE BLVD

 City-St-Zip:
 LAKEWORTH, FL 33463
 City-St-Zip:
 LOXAHATCHEE, FL 33470

Title: Title: (X) Change ( ) Addition ( ) Delete THEODORE, ILOMANE J THEODORE, ILOMANE J Name: Name: Address: 5908 ITHACACRC W. Address: 5908 ITHACACRC W. City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip: LAKE WORTH, FL 33463

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ST-JOAS, YVES
 Name:

 Address:
 5989 QUAIL DR APT#4
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33401
 City-St-Zip:

 $\label{eq:time_solution} \mbox{Title:} \qquad \mbox{S/D} \qquad \mbox{( ) Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{( ) Change ( ) Addition}$ 

 Name:
 NARASSE, JEANNETTE
 Name:

 Address:
 5201 #B WALLIS RD.
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33415
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ORIENTAL, ATUS
 Name:

 Address:
 6584 N PRIMIUM
 Address:

 City-St-Zip:
 LAKE WORTH, FL 33463
 City-St-Zip:

Title: D ( ) Delete Title: D/V (X) Change ( ) Addition

 Name:
 THEODORE, ILOMANE J
 Name:
 THEODORE, ILOMANE J

 Address:
 5908 ITHACA CIR W
 Address:
 5908 ITHACA CIR W

 City-St-Zip:
 LAKEWORTH, FL 33463
 City-St-Zip:
 LAKEWORTH, FL 33463

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: NOE THEODORE P/D 04/30/2007