

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 14, 2007
Secretary of State

DOCUMENT# N99000003447

Entity Name: CHURCH OF THE BRIDE OF JESUS CHRIST, INC**Current Principal Place of Business:**5047 SUMMIT BLVD
WEST PALM BEACH, FL 33417**New Principal Place of Business:****Current Mailing Address:**15259 OKEECHOBEE BLVD
LOXAHATCHEE, FL 33470**New Mailing Address:****FEI Number:** 31-1671144**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**THEODORE, NOE
15259 OKEECHOBEE BLVD
LOXAHATCHEE, FL 33470 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: P/D () Delete
Name: MADEUS, ELIE
Address: 15259 OKEECHOBEE BLVD
City-St-Zip: LOXAHATCHEE, FL 33470

Title: V/D () Delete
Name: THEODORE, ILOMANE J
Address: 5908 ITHACACRC W.
City-St-Zip: LAKE WORTH, FL 33463

Title: T () Delete
Name: ST-JOAS, YVES
Address: 5989 QUAIL DR APT#4
City-St-Zip: WEST PALM BEACH, FL 33401

Title: S/D () Delete
Name: NARASSE, JEANNETTE
Address: 5201 #B WALLIS RD.
City-St-Zip: WEST PALM BEACH, FL 33415

Title: D () Delete
Name: ORIENTAL, ATUS
Address: 6584 N PRIMMIUM
City-St-Zip: LAKE WORTH, FL 33463

Title: D/V () Delete
Name: THEODORE, ILOMANE J
Address: 5908 ITHACA CIR W
City-St-Zip: LAKEWORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: DECIUS, RONEL
Address: 1102 SOUTH E ST
City-St-Zip: LAKEWORTH, FL 33460

Title: T/D (X) Change () Addition
Name: THEODOR, FRANCNER
Address: 10304 PIPPIN LN
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D (X) Change () Addition
Name: ST-JOAS, YVES
Address: 5989 QUAIL DR APT#4
City-St-Zip: WEST PALM BEACH, FL 33401

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P/V (X) Change () Addition
Name: THEODORE, NOE
Address: 15259 OKEECHOBEE BLVD
City-St-Zip: LOXAHATCHEE, FL 33470

Title: D/ (X) Change () Addition
Name: THEODORE, ILOMANE J
Address: 5908 ITHACA CIR W
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/V

11/14/2007

Electronic Signature of Signing Officer or Director

Date