

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006651

FILED
Apr 21, 2009
Secretary of State

Entity Name: NEW BIRTH WORSHIP CENTER, INC.

Current Principal Place of Business:

724 SOUTH SEGRAVE STREET
DAYTONA BEACH, FL 32114

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10144
DAYTONA BEACH, FL 32120

New Mailing Address:

FEI Number: 59-3678812

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HICKLEY, LUTHER K
413 SCHOOL STREET
DAYTONA BEACH, FL 32114 US

Name and Address of New Registered Agent:

HICKLEY, LUTHER K
640 DEVON STREET
PORT ORANGE, FL 32127 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:

04/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HICKLEY, LUTHER K
Address: 640 DEVON STREET
City-St-Zip: PORT ORANGE, FL 32129

Title: V () Delete
Name: HICKLEY, MONIQUE A
Address: 640 DEVON STREET
City-St-Zip: PORT ORANGE, FL 32129

Title: V () Delete
Name: MORRIS, LATRONDA
Address: 413 SCHOOL STREET
City-St-Zip: DAYTONA BEACH, FL 32114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HICKLEY, LUTHER K
Address: 640 DEVON STREET
City-St-Zip: PORT ORANGE, FL 32127

Title: V (X) Change () Addition
Name: HICKLEY, MONIQUE A
Address: 640 DEVON STREET
City-St-Zip: PORT ORANGE, FL 32127

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: LUTHER K HICKLEY

P

04/21/2009

Electronic Signature of Signing Officer or Director

Date