

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700949

Entity Name: NEW SEVENTY NINTH STREET WORD CHURCH
INTERNATIONAL, INC.**Current Principal Place of Business:**2275 N W 79TH STREET
MIAMI, FL 33147-4925**Current Mailing Address:**P.O. BOX 470365
MIAMI, FL 33247-0354 US**FEI Number: 59-0711185****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**YOUNG, ROBERT
2275 N W 79TH STREET
MIAMI, FL 33147-4925 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	SD
Name	YOUNG, JOHNNIE E
Address	P.O. BOX 470365
City-State-Zip:	MIAMI FL 33247-0354

Title	D
Name	CANTY, SUSIE
Address	P.O. BOX 470365
City-State-Zip:	MIAMI FL 33247-0354

Title	D
Name	GABRIEL, BETTY
Address	P.O. BOX 470365
City-State-Zip:	MIAMI FL 33247-0354

Title	DIRECTOR
Name	BEASLEY, MARY
Address	P.O. BOX 470365
City-State-Zip:	MIAMI FL 33247-0354

Title	DIRECTOR
Name	YOUNG, ROBERT
Address	P.O. BOX 470365
City-State-Zip:	MIAMI FL 33247-0354

Title	DIRECTOR
Name	DAWSON, JIMMIE
Address	P.O. BOX 470365
City-State-Zip:	MIAMI FL 33247-0354

Title	DIRECTOR
Name	SMITH, RONALD
Address	P.O. BOX 470365
City-State-Zip:	MIAMI FL 33247-0354

Title	DIRECTOR
Name	HILL, ANGELA
Address	2275 N W 79TH STREET P O BOX 470365
City-State-Zip:	MIAMI FL 33147-4925

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I hereby 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 all other like empowered.

SIGNATURE: ROBERT YOUNG**AGENT****04/29/2025**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	COLLINS, WILLIAM
Address	P O BOX 470365
City-State-Zip:	MIAMI FL 33247-0354