

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006761

Entity Name: NEW CHURCH OF GOD SOLID ROCK COMMUNITY CENTER,
INC**FILED**
Feb 05, 2014
Secretary of State
CC0957055135**Current Principal Place of Business:**255 NE 166TH STREET
NORTH MIAMI BEACH, FL 33162**Current Mailing Address:**40 NE 152ND STREET
MIAMI, FL 33150 US**FEI Number: 34-2003310****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**FOND-ROSE, MARIE REV PASTOR
40 NE 152ND STREET
MIAMI, FL 33162 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: REV. MARIE FOND-ROSE, PASTOR****02/05/2014**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DCP
Name	FOND-ROSE, MARIE REV. PASTOR
Address	40 NE 152ND STREET
City-State-Zip:	MIAMI FL 33150

Title	DPV
Name	PLETEAU, GUYRLENE
Address	40 NE 152ND STREET
City-State-Zip:	MIAMI FL 33162

Title	DSEC
Name	DEROSIER, WALNA
Address	255 N.E 166TH STREET
City-State-Zip:	NO. MIAMI BEACH FL 33162

Title	DVP
Name	ROSE, JEAN G
Address	255 NE 166TH STREET
City-State-Zip:	NORTH MIAMI BEACH FL 33162

Title	DTRS
Name	DESROSIERS, MAGALYE
Address	255 NE 166TH STREET
City-State-Zip:	NORTH MIAMI BEACH FL 33162

Title	DBM
Name	JUNISSE, JEAN R
Address	255 NE 166TH STREET
City-State-Zip:	NORTH MIAMI BEACH FL 33162

Title	BOARD MEMBER AT LARGE
Name	DULCIO, JEAN LUC
Address	40 NE 152ND STREET
City-State-Zip:	MIAMI FL 33150

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: FOND-ROSE , MARIE , REV , PASTOR**PRESIDENT****02/05/2014**

Electronic Signature of Signing Officer/Director Detail

Date