

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000011287

Entity Name: CENTER POINTE FELLOWSHIP, INC.

Current Principal Place of Business:

1034 GATEWAY BLVD. STE. 104
BOYNTON BEACH, FL 33426

Current Mailing Address:

1034 GATEWAY BLVD. STE. 104
BOYNTON BEACH, FL 33426

FEI Number: 27-1399707

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARLEN, ROBERT M
101 SE 6TH AVENUE
SUITE D
DELRAY BEACH, FL 33483 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 PD
Name HAWKINS, JOHN D DR.
Address 309 E. OCEAN AVE
305
City-State-Zip: LANTANA FL 33462

Title VPD
Name CARRANZA, EDWIN
Address 6223 GRAND CYPRESS CIRCLE
City-State-Zip: LAKE WORTH FL 33463

Title SD
Name CARANZZA, HOLLY
Address 6223 GRAND CYPRESS CIRCLE
City-State-Zip: LAKE WORTH FL 33463

Title TD
Name GALLO, DONELLA
Address 4175 COLLIN DRIVE
City-State-Zip: WEST PALM BEACH FL 33406

Title AS
Name ARLEN, ROBERT M
Address 101 SE 6TH AVENUE
City-State-Zip: DELRAY BEACH FL 33483

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: JOHN HAWKINS, SR.

PASTOR

01/30/2014

Electronic Signature of Signing Officer/Director Detail

Date