

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000008297

**Entity Name:** NEW BEGINNINGS CHURCH OF GOD 7TH DAY INTERNATIONAL FLORIDA CONFERENCE INC.

**FILED**  
**Apr 30, 2019**  
**Secretary of State**  
**2735937324CC**

**Current Principal Place of Business:**

5159 SW 139 AVE  
MIRAMAR, FL 33027

**Current Mailing Address:**

5159 SW 139 AVE  
MIRAMAR, FL 33027 US

**FEI Number: 46-3703861**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BENT, DEWDNEY A  
5159 SW 139 AVE  
MIRAMAR, FL 33027 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: DEWDNEY BENT

04/30/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name BENT, DEWDNEY A PASTOR  
Address 5159 SW 139TH AVE  
City-State-Zip: MIRAMAR FL 33027

Title BOM  
Name BLACKWOOD, RUDLEY  
Address 2344 CENTERSTONE LANE  
City-State-Zip: RIVIERA BEACH FL 33404

Title VPT  
Name POWELL, DEVON  
Address 7342 NW 47TH PL  
City-State-Zip: LAUDERHILL FL 33319

Title AST  
Name MILLER, ROBIN  
Address 970 SW 50 TERRACE  
City-State-Zip: MARGATE FL 33068

Title BOM  
Name CLARKE, KEVIN  
Address 7002 NW 63RD ST.  
City-State-Zip: TAMARAC FL 33321

Title S  
Name ROBINSON, DECIA  
Address 9128 NW 44TH CT  
City-State-Zip: SUNRISE FL 33351

Title BOARD MEMBER  
Name GREENWOOD, ARTHUR  
Address 10079 OAK MEADOW LN  
City-State-Zip: LAKE WORTH FL 33449

*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: DEVON POWELL

VPT

04/30/2019

Electronic Signature of Signing Officer/Director Detail

Date