


**2004-NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

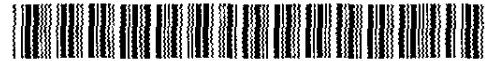
**FILED**  
**Jul 12, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # 744611  
 1. Entity Name  
 NEW LIFE IN CHRIST, INC.



Principal Place of Business 1633 S.W. 34TH STREET PALM CITY, FL 34990	Mailing Address 1633 S.W. 34TH STREET PALM CITY, FL 34990
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**DO NOT WRITE IN THIS SPACE**



07052004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-1911554	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
 SANVER, LARRY A  
 1031 SW ESTAUGH AVE  
 PORT SAINT LUCIE, FL 34953

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8. 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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE: *Larry A. Sanver* PD. *Larry Sanver* DATE: 7-5-04  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25**  
**Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SANVER, LARRY 1031 SW ESTAUGH AVE PORT SAINT LUCIE, FL 34953
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD TATSE, KEN 1737 SW BUCKSKIN TRAIL STUART, FL 34997
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD ENGLAND, LOUISE 1669 S.W. WILDCAT TRAIL STUART, FL 34997
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000165489  
 07/12/04-80016-003 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Larry A. Sanver* DATE: 7-5-04 DAYTIME PHONE #: 772 283 9426  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR