2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748250

Apr 22, 2009 Secretary of State

Entity Name: NEW LIFE PRESBYTERIAN CHURCH OF LAKE COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

201 LAVISTA ST

FRUITLAND PARK, FL 34731

Current Mailing Address: New Mailing Address:

201 LAVISTA ST

FRUITLAND PARK, FL 34731

FEI Number: 59-2050661 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SEWELL, STEVE 907 WEBSTER ST

LEESBURG, FL 34785 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

NEWMAN, TOM VANDERLEY, JON Name: Name: 4132 BAIR AVE Address: 1101 S 9TH ST. Address: City-St-Zip: FRUITLANT PARK, FL 34731 City-St-Zip: LEESBURG, FL 34748

Title: SD () Delete Title: () Change () Addition

Name: HALIDAY, MARCIA Name: Address: 905 N SHORE DR Address: City-St-Zip: LEESBURG, FL 34748 City-St-Zip:

Title: () Delete Title: VΡ (X) Change () Addition

THATCHER, JIM BOLTON, SUSAN Name: Name:

33150 GRAND CYPRESS WAY Address: 34205 PARK LANE Address: City-St-Zip: LEESBURG, FL 34788 City-St-Zip: LEESBURG, FL 34748

Title: TR () Delete Title: TR (X) Change () Addition

KEMP, JANICE Name: Name: BOND, CAROLYN

2020 ALLENDALE AVENUE Address: 33300 SOMERSET DR Address: City-St-Zip: LEESBURG, FL 34788 City-St-Zip: THE VILLAGES, FL 32159

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARCIA HALIDAY SD 04/22/2009