

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006715

FILED
Jan 05, 2006
Secretary of State

Entity Name: COMMUNITY NEW LIFE FELLOWSHIP CORP.

Current Principal Place of Business:

7600 LYONS ROAD
LECTURE HALL
COCONUT CREEK, FL 33073 US

New Principal Place of Business:

Current Mailing Address:

8891 SW 16TH STREET
BOCA RATON, FL 330433 US

New Mailing Address:

FEI Number: 32-0029210

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREIRA, ILMAR A PASTOR
8891 SW 16TH STREET
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PEREIRA, ILMAR A
Address: 8891 SW 16TH STREET
City-St-Zip: BOCA RATON, FL 33433 US

Title: 1VPD () Delete
Name: PEREIRA, MARTA A
Address: 8891 SW 16TH STREET
City-St-Zip: BOCA RATON, FL 33433 US

Title: 1TD () Delete
Name: SANTOS, DIOCENYR R
Address: 740 SE 1 WAY # 114
City-St-Zip: DEERFIELD, FL 33441 US

Title: 2TD () Delete
Name: ALVES, PAULO R
Address: 8891 SW 16TH STREET
City-St-Zip: BOCA RATON, FL 33433 US

Title: 1SD () Delete
Name: OLIVEIRA, LUIZ CLAUDIO
Address: 355 PEEBLE STONE LN
City-St-Zip: COCONUT CREEK, FL 33073 US

Title: 2 SD () Delete
Name: MILAN, ROSA
Address: 7620 NW 18TH STREET APT 204
City-St-Zip: MARGATE, FL 33063 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: 1SD (X) Change () Addition
Name: CARDOSO, VINICIUS B
Address: 560 SE 2^o AV. APTO H 08
City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ILMAR ALVES PEREIRA

REV

01/05/2006

Electronic Signature of Signing Officer or Director

Date