2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2008
Secretary of State

DOCUMENT# N02000006715

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 (X)**

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 PASTOR	
Address:	8891 SW 16TH STREET	
City-St-Zip:	BOCA RATON, FL 33433 US	
Title:	1VPD	( ) Delete
Name:	PEREIRA, MARTA A PASTOR	
Address:	8891 SW 16TH STREET	
City-St-Zip:	BOCA RATON, FL 33433 US	
Title:	1TD	( ) Delete
Name:	SANTOS, DIOCENYR R DEACON	
Address:	740 SE 1 WAY # 114	
City-St-Zip:	DEERFIELD, FL 33441 US	
Title:	2TD	( ) Delete
Name:	ALVES, PAULO R PASTOR	
Address:	8891 SW 16TH STREET	
City-St-Zip:	BOCA RATON, FL 33433 US	
Title:	1SD	( ) Delete
Name:	DARREL, ROBERSON DEACON	
Address:	33 E CAMINO REAL, APTO 515	
City-St-Zip:	BOCA RATON, FL 33432 US	
Title:	2 SD	( ) Delete
Name:	CARDOSO, VINICIUS B	
Address:	560 SE 2ª AVENUE, APTO H 8	
City-St-Zip:	DEERFIELD BEACH, FL 33441 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:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: ILMAR ALVES PEREIRA PD 04/27/2008

Electronic Signature of Signing Officer or Director — Date