

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012538

FILED
Jan 25, 2008
Secretary of State

Entity Name: PHILADELPHIA NEW LIFE CHRISTIAN CENTER, INC.

Current Principal Place of Business:

5812 BLUEBERRY COURT
LAUDERHILL, FL 33313

New Principal Place of Business:

Current Mailing Address:

5812 BLUEBERRY COURT
LAUDERHILL, FL 33313

New Mailing Address:

FEI Number: 01-0893395

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JENKINS, DARLEEN
5812 BLUEBERRY COURT
LAUDERHILL, FL 33313 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: P () Delete
Name: JENKINS, DARLEEN
Address: 5812 BLUEBERRY COURT
City-St-Zip: LAUDERHILL, FL 33313

Title: V () Delete
Name: JENKINS, CALVIN
Address: 5812 BLUEBERRY COURT
City-St-Zip: LAUDERHILL, FL 33313

Title: S () Delete
Name: SCOTT, ROXANNE
Address: 5025 NW 36TH STREET, APT G203
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: T () Delete
Name: HARDWICK, MOZELLE
Address: 4343 NW 71ST TERRACE
City-St-Zip: LAUDERHILL, FL 33319

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:

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: DARLEEN JENKINS

PRES

01/25/2008

Electronic Signature of Signing Officer or Director

Date