

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N93000001493 (6)

1. Corporation Name

NEW LIFE MINISTRIES CHURCH OF THE LIVING GOD, IN C.



Principal Place of Business

Mailing Address

2487 N.W. 21ST STREET  
FORT LAUDERDALE FL 33311

4040 N.E. 6TH AVENUE  
POMPANO BEACH FL 33064

3. Date Incorporated or Qualified

03/31/1993

3a. Date of Last Report

05/03/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

65-0405145

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

City & State

23

28

6. Election Campaign Financing

\$5.00 May Be Added to Fees

City & State

City & State

24

Zip

Country

Zip

Country

25

29

30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MILLER, CURTIS T  
4040 N.E. 6TH AVENUE  
POMPANO BEACH FL 33064

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
PD	MILLER, CURTIS T	4040 NE 6TH AVE	POMPANO BEACH FL 33064	<input type="checkbox"/>
D	MILLER, FAYE	4040 NE 6TH AVE	POMPANO BEACH FL 33064	<input type="checkbox"/>
TD	REID, ALICE D	10910 NW 14TH AVE	MIAMI FL 33167	<input type="checkbox"/>
SD	GAINES, JEANETTE L	5979 NW 29TH ST	SUNRISE FL 33313	<input type="checkbox"/>
CD	GOMILLION, BEN	820 NW 33RD WAY	FT. LAUDERDALE FL 33311	<input checked="" type="checkbox"/>
D	GOMILLION, MAMIE	820 NW 33RD WAY	FT. LAUDERDALE FL 33311	<input checked="" type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
D	Rebbie Kelly	2210 N.W. 23rd Lane	Fort Lauderdale Fla. 33311	<input type="checkbox"/>
D	Sally Fleming	3019 N.W. 11th Ct	Pompano Beach Fla 33064	<input type="checkbox"/>
D	Sharon Monroe	20 N.W. 7th Ave. Apt. 1	Pompano Beach Fla. 33060	<input type="checkbox"/>
D	Francis Thigpen	22297 S.W. 6th Ave.	Boca Raton Fla. 33428	<input type="checkbox"/>
CD	Alphonse Smith	2939 N.W. 56 Ave.	Lauderdale Lakes Fla 33313	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Curtis T Miller* Curtis T Miller 1-21-96 (954) 782-8386

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)