

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004212

FILED
Jan 21, 2009
Secretary of State

Entity Name: NEW LIFE CHRISTIAN MINISTRIES, INC.

Current Principal Place of Business:

1436 SAN DIEGO DRIVE
DUNEDIN, FL 34698 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1411
DUNEDIN, FL 34697 US

New Mailing Address:

FEI Number: 59-3202331

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LAMB, JOHN L
1509 SAN DIEGO DRIVE
DUNEDIN, FL 34698 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: LAMB, CHARLES E REV.
Address: 1436 SAN DIEGO DRIVE
City-St-Zip: DUNEDIN, FL 34698 US

Title: DT () Delete
Name: LAMB, SHIRLEY
Address: 1436 SAN DIEGO DRIVE
City-St-Zip: DUNEDIN, FL 34698

Title: SD () Delete
Name: LAMB, JOHN L
Address: 1509 SAN DIEGO DR
City-St-Zip: DUNEDIN, FL 34698

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:

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: CHARLES E. LAMB

PD

01/21/2009

Electronic Signature of Signing Officer or Director

Date