

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003537

FILED
May 26, 2009
Secretary of State

Entity Name: NEW LIFE INTERNATIONAL CHRISTIAN CENTER OF PORT CHARLOTTE, INC.

Current Principal Place of Business:

1255 KINGS LAND ST
PORT CHARLOTTE, FL 33954 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 494268
PORT CHARLOTTE, FL 33949 US

New Mailing Address:

FEI Number: 65-0641885 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GARCIA, JERRY
17030 KELLOG AVE
PORT CHARLOTTE, FL 33954 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: GARCIA, JERRY
Address: 17030 KELLOG AVE
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: TD () Delete
Name: OQUENDO, HECTOR
Address: 1255 KINGS LAND ST
City-St-Zip: PORT CHARLOTTE, FL 33954 US

Title: SD () Delete
Name: PEREZ, FELIX
Address: 1255 KINGSLAND ST
City-St-Zip: PORT CHARLOTTE, FL 33954

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: RODRIGUEZ, JOSE
Address: 1255 KINGSLAND ST
City-St-Zip: PORT CHARLOTTE, FL 33954

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: JERRY GARCIA

PRES

05/26/2009

Electronic Signature of Signing Officer or Director

Date