

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000009304

**Entity Name:** NEW LIFE CHRISTIAN CENTER INC.

**Current Principal Place of Business:**

16981 NE 8 CT  
N MIAMI BEACH, FL 33162

**Current Mailing Address:**

16981 NE 8 CT  
N MIAMI BEACH, FL 33162

**FEI Number:** 90-0893445

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

PAYNE, JANDRA M  
16981 NE 8 CT  
N MIAMI BEACH, FL 33162 US

*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

**Officer/Director Detail :**

Title P  
Name PAYNE, BRUCE  
Address 16981 NE 8 CT  
City-State-Zip: N MIAMI BEACH FL 33162

Title VP  
Name PAYNE, JANDRA  
Address 16981 NE 8 CT  
City-State-Zip: N MIAMI BEACH FL 33162

Title ST  
Name PAYNE, STEPHANIE L  
Address 4649 NW 89 AVE  
City-State-Zip: SUNRISE FL 33351

I hereby 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 all other like empowered.

**SIGNATURE:** STEPHANIE PAYNE

ST

03/17/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date