

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000011414

Entity Name: NEW LIFE ANGLICAN FELLOWSHIP CHURCH, INC.**Current Principal Place of Business:**370 EAST INTERLAKE BLVD
LAKE PLACID, FL 33852**Current Mailing Address:**370 EAST INTERLAKE BLVD
LAKE PLACID, FL 33852**FEI Number:** 47-2579881**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**RHODES, DAVID W ESQ
370 EAST INTERLAKE BLVD
LAKE PLACID, FL 33852 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 PD
Name THE REVEREND SUSAN TWEARDY
RHODES
Address 370 EAST INTERLAKE BLVD
City-State-Zip: LAKE PLACID FL 33852

Title SD
Name GROSSMAN, KIMBERLY
Address 3501 DUFFER ROAD
City-State-Zip: SEBRING FL 33872

Title D
Name JOSEPH, JOANNE
Address 1585 BUCK STREET
City-State-Zip: LAKE PLACID FL 33852

Title VPD
Name LAPERRIERE, JEAN
Address 248 TANGERINE ROAD
City-State-Zip: LAKE PLACID FL 33852

Title TD
Name RHODES, DAVID W
Address 370 EAST INTERLAKE BLVD
City-State-Zip: LAKE PLACID FL 33852

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: SUSAN T. RHODES**PRESIDENT****04/13/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date