

2021 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N93000001493

Entity Name: NEW LIFE LEARNING CENTER INC

Current Principal Place of Business:

2487 NW 21TH STREET
FORT LAUDERDALE, FL 33311

Current Mailing Address:

2711 N.E. 2ND AVE.
POMPANO BCH., FL 33064 US

FEI Number: 65-0405145

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MILLER, CURTIS T
4931 WEST SAMPLE ROAD
APT. 111
COCONUT CREEK, FL 33073 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: CURTIS T. MILLER

10/06/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title BISHOP
Name MILLER, CURTIS T BISHOP
Address 4931 WEST SAMPLE ROAD
APT.111
City-State-Zip: COCONUT CREEK FL 33073

Title SR. PASTOR & PRESIDENT
Name MILLER, FAYE SR. PASTOR
Address 4931 WEST SAMPLE RD.
APT.111
City-State-Zip: COCONUT CREEK FL 33073

Title DIRECTOR
Name EDWARDS, DARENE A. DR..
Address 800 NW 198TH STREET
City-State-Zip: MIAMI GARDENS FL 33169

Title DIRECTOR
Name ROBINSON, DONALD N PASTOR
Address 10911 NW 21ST STREET
City-State-Zip: CORAL SPRINGS FL 33071

Title DIRECTOR
Name SNEED-ROBINSON , LUCILLE A PASTOR
Address 10911 NW 21ST STREET
City-State-Zip: CORAL SPRINGS FL 33071

Title DIRECTOR
Name FROSTER, ANN PASTOR
Address 2214 N 40TH AVENUE
City-State-Zip: HOLLYWOOD FL 33021

Title OFFICER
Name ROSS, LAURA EVANGELIST
Address 2487 NW 21ST STREET
City-State-Zip: FT. LAUDERDALE FL 33311

Title OFFICER
Name THIGPEN, FRANCES CHURCH MOTHER
Address 5967 NW 74TH TERR.
City-State-Zip: PARKLAND FL 33069

Continues on page 2

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: FAYE MILLER

SR. PASTOR/PRESIDENT

10/06/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SECRETARY
Name INNOCENT, ALECXINA
Address 790 NE 45TH STREET
City-State-Zip: POMPANO FL 33064

Title OFFICER
Name BROOKS, PATRICIA CHURCH MOTHER
Address 2487 NW 21ST STREET
City-State-Zip: FORT LAUDERDALE FL 33311

Title OFFICER
Name FIELDS, CHRISTINE EVANGELIST
Address 2487 NW 21ST STREET
City-State-Zip: FORT LAUDERDALE FL 33311

Title OFFICER
Name HARRIS, ANNIE
Address 2487 NW 21ST STREET
City-State-Zip: FORT LAUDERDALE FL 33311