

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707712

FILED
Feb 19, 2009
Secretary of State

Entity Name: NEW LIFE AT PARK STREET, INC.

Current Principal Place of Business:

5975 WEST PARK STREET
JACKSONVILLE, FL 32205

New Principal Place of Business:

Current Mailing Address:

5975 WEST PARK STREET
JACKSONVILLE, FL 32205

New Mailing Address:

FEI Number: 59-1378940

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ENGEL, RUSSELL
4580 COLONIAL AVENUE
JACKSONVILLE, FL 32210 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: TD () Delete
Name: ENGEL, RUSSELL
Address: 4580 COLONIAL AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

Title: CD () Delete
Name: DORANCRICCHIO, JOHN
Address: 7639 MEMORIAL PARK CIRCLE
City-St-Zip: JACKSONVILLE, FL 32221

Title: CD () Delete
Name: HAGAN, CURTIS
Address: 7711 STILLWELL RD
City-St-Zip: JACKSONVILLE, FL 32221

Title: S () Delete
Name: LOOMAN, MATHEW
Address: 1504 MARSH RABBIT WAY
City-St-Zip: ORANGE PARK, FL 32003

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:

Title: S (X) Change () Addition
Name: ROHMAN, STEVE
Address: 1003 VICTORY LAKE DRIVE
City-St-Zip: JACKSONVILLE, FL 32221

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: STEVE ROHMAN

S

02/19/2009

Electronic Signature of Signing Officer or Director

Date