2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#721702

FILED Jan 26, 2006 Secretary of State

Entity Name: NEW LIFE FELLOWSHIP INTERNATIONAL, INC.

Current Principal Place of Business: New Principal Place of Business: 2740 EAST MICHIGAN STREET ORLANDO, FL 32806 **Current Mailing Address: New Mailing Address:** 2740 EAST MICHIGAN STREET ORLANDO, FL 32806 FEI Number: 59-1552046 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CROLEY, STEPHEN D CROLEY, STEPHEN D 5101 JETSAIL DRIVE 5098 BOÁTHOUSE DRIVE ORLANDO, FL 32812 US ORLANDO, FL 32812 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: 01/26/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CROLEY, STEPHEN D Name: Name: 5098 BOATHOUSE DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32812 City-St-Zip: Title: VC () Delete Title: (X) Change () Addition WARREN, CARRIE Name: WARREN, CAROLYN A Name: Address: 4927 GRAN-LAC AVENUE Address: 4927 GRAN-LAC AVENUE City-St-Zip: ORLANDO, FL 32812 City-St-Zip: ORLANDO, FL 32812 Title: () Delete Title: () Change () Addition HICKS, DEREK Name: Name: 1722 SILVERCREEK COURT Address: Address: City-St-Zip: ORLANDO, FL 32807 City-St-Zip: (X) Change () Addition Title: VΡ () Delete Title: Name: WARREN, CARRIE Name: CROLEY, ALBA L 5098 BOATHOUSE DRIVE Address: 4927 GRAN-LAC AVENUE Address: City-St-Zip: ORLANDO, FL 32812 City-St-Zip: ORLANDO, FL 32812 Title: () Delete Title: (X) Change () Addition DIAZ, EVELYN BURTON, DEBRA Name: Name: 8234 NEWBURY SOUND LANE 4773 FOX STREET Address: Address: City-St-Zip: ORLANDO, FL 32829 City-St-Zip: ORLANDO, FL 32814 Title: () Delete Title: () Change () Addition DIAZ. EVELYS Name: Name: Address: 8234 NEWBURY SOUND LANE Address: ORLANDO, FL 32829 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: STEPHEN D. CROLEY PD 01/26/2006