

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732658

FILED  
Jan 30, 2006  
Secretary of State

Entity Name: NEW LIFE ASSEMBLY OF GOD, INC.

## Current Principal Place of Business:

8250 U S HWY 98N  
LAKELAND, FL 33809

## New Principal Place of Business:

## Current Mailing Address:

8250 U S HWY 98N  
LAKELAND, FL 33809

## New Mailing Address:

FEI Number: 59-2247166

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

STUBBLEFIELD, ROBERT  
8250 US 98 NORTH  
LAKELAND, FL 33809 US

## Name and Address of New Registered Agent:

DAVIS, JEFFERY DR.  
605 E. LAUREL POINTE DR.  
LAKELAND, FL 33813 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: DR. JEFFERY DAVIS

01/30/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: TS ( ) Delete  
Name: STEWART, LOYD  
Address: 261 LEITHA WAY  
City-St-Zip: LAKELAND, FL 33809

Title: TR ( ) Delete  
Name: BELL, DAVID  
Address: 1512 BOWMANS TR  
City-St-Zip: LAKELAND, FL 33809

Title: D ( ) Delete  
Name: STUBBLEFIELD, ROBERT  
Address: 1909 CREEK BEND DR  
City-St-Zip: LAKELAND, FL 33811

Title: TR ( ) Delete  
Name: BARNETT, GREG  
Address: 1534 FERN PLACE  
City-St-Zip: LAKELAND, FL 33801

Title: TR ( ) Delete  
Name: HAUN, STEVE  
Address: 6605 DARTMOUTH RD  
City-St-Zip: LAKELAND, FL 33809

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TS (X) Change ( ) Addition  
Name: KNUTSON, MISTY  
Address: 4940 CLAYTON RD  
City-St-Zip: KATHLEEN, FL 33849

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: DAVIS, JEFFERY DR.  
Address: 605 E. LAUREL POINTE DR  
City-St-Zip: LAKELAND, FL 33813

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TR (X) Change ( ) Addition  
Name: FERGUSON, NICK  
Address: 1337 COSTINE DR  
City-St-Zip: LAKELAND, FL 33809

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: DR. JEFFERY DAVIS

D

01/30/2006

Electronic Signature of Signing Officer or Director

Date