2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738337

FILED Jan 27, 2009 Secretary of State

Entity Name: NEW TESTAMENT CHURCH AND MISSION, INC.

Current Principal Place of Business: New Principal Place of Business: 604 LEMON STREET 604 LEMON AVE SEBRING, FL 33870 SEBRING, FL 33870 **Current Mailing Address: New Mailing Address:** 604 LEMON AVE SEBRING, FL 33870 FEI Number: 59-1894628 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: MORALES, KATHLEEN K 3800 PALAZZO ST SEBRING, FL 33872 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WACK, KIMDALIN, Name: Name: 2309 ANDALAUSIA STREET Address: Address: City-St-Zip: SEBRING, FL 33875 City-St-Zip: Title: PAD () Delete Title: () Change () Addition KARL, PATRICIA A Name: Name: Address: 604 LEMON AVE Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: Title: () Delete Title: () Change () Addition KARL, MICHAEL C Name: Name: 604 LEMON AVE Address: Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: Title: VD () Delete Title: T1VP (X) Change () Addition Name: WACK, PHILLIP. Name: MORALES, KATHLEEN W, 2309 ANDALUSIA STREET Address: Address: 3800 PALAZZO ST. SEBRING, FL 33872 City-St-Zip: SEBRING, FL 33875 City-St-Zip: Title: T3V () Delete Title: 2VP (X) Change () Addition WACK, KATHLEEN K REYES, JONATHAN, Name: Name: 2309 ANDALUSIA STREET 4424 NAVARRE AVE. Address: Address: City-St-Zip: SEBRING, FL 33875 City-St-Zip: SEBRING, FL 33872 Title: () Delete Title: (X) Change () Addition NYHAN, STEVEN J MERCER, LISA. Name: Name: Address: 401 CARDINAL Address: 268 DUNLIN AVE. SEBRING, FL 33876 SEBRING, FL 33872 City-St-Zip: City-St-Zip:

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: KATHLEEN W. MORALES T1VP 01/27/2009