


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 08:00 AM
Secretary of State

DOCUMENT # 744648
 1. Entity Name
NEWLIFE CHRISTIAN FELLOWSHIP CHURCH CENTER, INC.



Principal Place of Business Mailing Address
8008 N. ARMENIA **P.O. BOX 261105**
TAMPA, FL **US** **TAMPA, FL 33685-1105 US**

DO NOT WRITE IN THIS SPACE



04102008 No Chg-NP CR2E037 (4/06)

4. FEI Number Applied For
59-2689710 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
MIMS, R.W.(REV)
7615 PALMBROOK DR.
TAMPA, FL 33615

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

000000913826
 05/08/08-80031-016 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MIMS, RICHARD 7615 PALMBROOK DR. TAMPA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DFS MATHEWS, VIVIAN 2867 DUNCAN TREE CIRCLE VALRICO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FSD MIMS, FLORA 7615 PALMBROOK DR. TAMPA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MATHEWS, NATHANIEL F 2867 DUNCAN TREE CIRCLE VALRICO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ELLISON, LEOLA ANNE TSD 712 STAR PONTE DRIVE SEFFNER, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other titles empowered.

SIGNATURE: RICHARD W. MIMS *Richard W. Mims* 4/17/08 (813) 276-2932
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #