

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747217

FILED
May 01, 2008
Secretary of State

Entity Name: NEW LIFE WORSHIP CENTER OF PANAMA CITY, INC.

Current Principal Place of Business:

4141 E 15TH ST
PANAMA CITY, FL 32404

New Principal Place of Business:

7823 HWY 2301
PANAMA CITY, FL 32404

Current Mailing Address:

4141 E 15TH ST
PANAMA CITY, FL 32404 US

New Mailing Address:

P.O. BOX 35698
PANAMA CITY, FL 32412 US

FEI Number: 59-1911226 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BARNES, CYNTHIA T
4141 E 15TH STREET
PANAMA CITY, FL 32404 US

Name and Address of New Registered Agent:

BARNES, CYNTHIA T
7823 HWY 2301
PANAMA CITY, FL 32404 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:

05/01/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PDB () Delete
Name: BARNES, CARL T
Address: 4141 E 15TH STREET
City-St-Zip: PANAMA CITY, FL 32404

Title: VT () Delete
Name: BARNES, CYNTHIA T
Address: 4141 E 15TH STREET
City-St-Zip: PANAMA CITY, FL 32404

Title: VPD () Delete
Name: WILLIAMS, SCOTT
Address: 6510 LAKE SUZZANNE CIRCLE
City-St-Zip: PANAMA CITY, FL 32404

Title: VPD () Delete
Name: SARVIS, CHARLES
Address: 11912 MARABOU COURT
City-St-Zip: JACKSONVILLE, FL 32223

Title: VPD (X) Delete
Name: DAVIS, GREG
Address: 4710 OAK CIRCLE
City-St-Zip: SEBRING, FL 33875

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDB (X) Change () Addition
Name: BARNES, CARL T
Address: 7823 HWY 2301
City-St-Zip: PANAMA CITY, FL 32404

Title: VT (X) Change () Addition
Name: BARNES, CYNTHIA T
Address: 7823 HWY 2301
City-St-Zip: PANAMA CITY, FL 32404

Title: VPD (X) Change () Addition
Name: DAVIS, GREG
Address: 31 MARSHALL AVENUE
City-St-Zip: LAKE PLACID, FL 33852

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

Title: () Change () Addition
Name:
Address:
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: CYNTHIA T BARNES

VT

05/01/2008

Electronic Signature of Signing Officer or Director

Date