

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 21, 1999 8:00 am
Secretary of State

04-21-1999 90101 008 ****61.25

DOCUMENT # 755683

1. Corporation Name

NEW LIFE ALLIANCE CHURCH, INC.

Principal Place of Business

12265 INDIANTOWN ROAD
JUPITER FL 33478
US

Mailing Address

12265 INDIANTOWN RD
JUPITER FL 33478
US



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified
12/24/1980

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number
59-1708150

Applied For
Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23 Zip Country

28 Zip Country

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24 25 29 30
9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FOSTER, JOHN FENN
1897 PALM BEACH LAKES BLVD.
WEST PALM BEACH FL 33409

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

33478

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/18/99
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VD
NAME VARELLA, DAVID.
STREET ADDRESS 4103 DAKOTA PL
CITY-ST-ZIP PALM BCH GDNS FL

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME MATHIS, E. DEWEY
STREET ADDRESS 16040 MELLE LANE.
CITY-ST-ZIP JUPITER FL 33478

☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE PD
NAME PENNELL, STEVE
STREET ADDRESS 12265 INDIANTOWN RD
CITY-ST-ZIP JUPITER FL 33478

☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE T
NAME BAUR, SCOTT
STREET ADDRESS 16887 96 TERR. N.
CITY-ST-ZIP JUPITER FL 33478

☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE S
NAME VARELL, SUE
STREET ADDRESS 4103 DAKOTA PL
CITY-ST-ZIP PALM BEACH GARDENS FL 33418

☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or as an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
JONATHAN SCOTT BAUR 4/18/99 (561) 624-3277
Date Daytime Phone #

CR2E037- (11/98)