## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0000000550

FILED Apr 27, 2005 Secretary of State

Entity Name: NEW LIFE PRAISE AND WORSHIP CENTER INC.

Current Principal Place of Business: New Principal Place of Business:

1841 NW 152 STREET 627 SEAMAN STREET OPA LOCKA, FL 33054 WAYCROSS, GA 31501

Current Mailing Address: New Mailing Address:

 1841 NW 152 STREET
 627 SEAMAN STREET

 OPA LOCKA, FL 33054
 WAYCROSS, GA 31501

FEI Number: 65-0988064 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DOUNVEOR, JANDRA P
1841 NW 152 STREET
OPA LOCKA, FL 33054 US
DOUNVEOR, JANDRA P
627 SEAMAN STREET
WAYCROSS, FL 31501 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: 04/27/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 DOUNVEOR, JANDRA P
 Name:
 DOUNVEOR, JANDRA P

 Address:
 18911 N W 7 COURT
 Address:
 627 SEAMAN STREET

 City-St-Zip:
 MIAMI, FL 33169
 City-St-Zip:
 WAYCROSS, GA 31501

Title: TD ( ) Delete Title: TD (X) Change ( ) Addition Name: DOUNVEOR, BOYD Name: DOUNVEOR, BOYD

 Name:
 DOUNVEOR, BOYD
 Name:
 DOUNVEOR, BOYD

 Address:
 18911 N W 7 COURT
 Address:
 627 SEAMAN STREET

 City-St-Zip:
 MIAMI, FL 33169
 City-St-Zip:
 WAYCROSS, GA 31501

Title: DS ( ) Delete Title: DS (X) Change ( ) Addition

 Name:
 PAYNE, STEPHANIE
 Name:
 PAYNE, STEPHANIE

 Address:
 18911 N W 7 COURT
 Address:
 627 SEAMAN STREET

 City-St-Zip:
 MIAMI, FL 33169
 City-St-Zip:
 WAYCROSS, GA 31501

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEPHANIE PAYNE DS 04/27/2005