

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002403

FILED  
Feb 25, 2012  
Secretary of State

**Entity Name:** NEW LIFE CHRISTIAN MINISTRIES OF NICEVILLE, INC.

**Current Principal Place of Business:**

130 N. PARTIN DR.  
NICEVILLE, FL 32578

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1031  
NICEVILLE, FL 32588

**New Mailing Address:**

**FEI Number:** 59-3364041

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOORE, BRET A  
THE MOORE LAW FIRM, P.A.  
135 E. JOHN SIMS PARKWAY  
NICEVILLE, FL 32578 US

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

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:**

Title: P  
Name: JOHNSON, ANNIE M  
Address: 312 23RD ST  
City-St-Zip: NICEVILLE, FL 32578

Title: SD  
Name: WILLIAMS, ALAINA  
Address: 514 KUMQUAT AVE  
City-St-Zip: NICEVILLE, FL 32578

Title: TD  
Name: COLEMAN, CAROLYN F  
Address: 211 S HAMPTON CT  
City-St-Zip: NICEVILLE, FL 32578

Title: C  
Name: JOHNSON, TOMMY P SR  
Address: 312 23RD ST  
City-St-Zip: NICEVILLE, FL 32578

Title: VP  
Name: COLLINS, KIMBERLY D  
Address: 312 23RD ST  
City-St-Zip: NICEVILLE, FL 32578

Title: D  
Name: PEET, SHEVON  
Address: 1037 DARLINGTON OAK  
City-St-Zip: NICEVILLE, FL 32578

I hereby 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 all other like empowered.

SIGNATURE: CAROLYN F. COLEMAN

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02/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date