## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000004241

FILED Jul 25, 2006 Secretary of State

Entity Name: NEW CHRISTIAN-LIFE MINISTRIES CHURCH, INCORPORATED

Current P	rincipal Place of Business:	New Principal Place of Business:
	101ST WAY	
307 PEMBROH	KE PINES, FL 33025	
Current M	lailing Address:	New Mailing Address:
1375 SW <sup>-</sup>	101ST WAY	
307 PEMBROK	KE PINES, FL 33025	
	Address of Current Registered Agent:	New Mailing Address:  025  FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) (b), F.S., the corporation did not receive the prior notice.
#307 PEMBROH	. 101 WAY  KE PINES, FL 33025 US  I named entity submits this statement for the purpo	se of changing its registered office or registered agent or b
#307 PEMBROH The above	KE PINES, FL 33025 US	se of changing its registered office or registered agent, or b
#307 PEMBROH The above	KE PINES, FL 33025 US named entity submits this statement for the purpole of Florida.	se of changing its registered office or registered agent, or b
#307 PEMBRON The above n the State	KE PINES, FL 33025 US named entity submits this statement for the purpole of Florida.	se of changing its registered office or registered agent, or b Date
#307 PEMBRON The above n the State SIGNATUI	KE PINES, FL 33025 US named entity submits this statement for the purpoe of Florida.	
#307 PEMBRON The above n the State SIGNATUI	KE PINES, FL 33025 US named entity submits this statement for the purpose of Florida.  RE: Electronic Signature of Registered Agent	Date
#307 PEMBROP The above In the State SIGNATUI  DFFICER Value: Valu	KE PINES, FL 33025 US  named entity submits this statement for the purpole of Florida.  RE:  Electronic Signature of Registered Agent  S AND DIRECTORS:  PD () Delete DIXON, SANDRA L 1375 SW 101ST WAY	Date  ADDITIONS/CHANGES TO OFFICERS AND DIREC  Title: ( ) Change ( ) Addition Name: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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: SANDRA DIXON PD 07/25/2006