

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003484

FILED
Feb 03, 2004
Secretary of State

Entity Name: NEW LIFE FELLOWSHIP OF SARASOTA, INC.

Current Principal Place of Business:

4411 BEE RIDGE ROAD, #244
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

4411 BEE RIDGE ROAD, #244
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 65-1115666

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEACHY, RICKY A
4411 BEE RIDGE ROAD, #244
SARASOTA, FL 34233

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: PD () Delete
Name: WAGLER, PETE
Address: 7398 CASTLE DR
City-St-Zip: SARASOTA, FL 34240

Title: VD () Delete
Name: WEAVER, ROBERT
Address: 3910 EATON PLACE
City-St-Zip: SARASOTA, FL 34241

Title: SD () Delete
Name: HELMUTH, DOYLE
Address: 4615 CRONIN DRIVE
City-St-Zip: SARASOTA, FL 34232

Title: TD () Delete
Name: HOSTETLER, JOSEPH
Address: 1119 COLEMAN AVENUE
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: JOSEPH HOSTETLER

TD

02/03/2004

Electronic Signature of Signing Officer or Director

Date