

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003435

FILED
Apr 30, 2005
Secretary of State

Entity Name: NEW LIFE IN CHRIST BELIEVERS TABERNACLE OUTREACH MINISTRY INC.

Current Principal Place of Business:

1104 NE 23 RD ST
GAINESVILLE, FL 32641

New Principal Place of Business:

Current Mailing Address:

1104 NE 23 RD ST
GAINESVILLE, FL 32641

New Mailing Address:

FEI Number: 11-3168654 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

NEAL, JUDY
1104 NE 23 RD ST
GAINESVILLE, FL 32641 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: D () Delete
Name: NEAL, OLLIE
Address: 1104 NE 23RD ST
City-St-Zip: GAINESVILLE, FL 32641

Title: D () Delete
Name: NEAL, JUDY
Address: 1104 NE 23RD ST
City-St-Zip: GAINESVILLE, FL 32641

Title: D () Delete
Name: HARVEY, TOMMY
Address: 913 NE 23RD ST
City-St-Zip: GAINESVILLE, FL 32641

Title: D () Delete
Name: AUGUSTINE, PENNY V
Address: 2410 GODBY BLVD
City-St-Zip: ATLANTIC, GA

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: NEAL, JUDY D PASTOR
Address: 1104 NE 23RD ST
City-St-Zip: GAINESVILLE, FL 32641

Title: D (X) Change () Addition
Name: MITCHELL, LATRINA S FINAN.
Address: 114-03 210 ST.
City-St-Zip: CAMBRIA HEIGHTS, NY 11411

Title: D (X) Change () Addition
Name: JONES, JONNIE III
Address: 12030 N.E. 63RD PL.
City-St-Zip: WILSTON, FL 32696

Title: D (X) Change () Addition
Name: PURVIS, ANNIE L
Address: 185 ST MARKS PL APT. 18H
City-St-Zip: STATEN ISLAND, NY 11301

Title: D () Change (X) Addition
Name: CHRISTOPHER, TIMOTHY
Address: 580 STANLEY AVE.
City-St-Zip: BROOKLYN, NY 11207

Title: D () Change (X) Addition
Name: TYSON, BARBARA
Address: 1004 S.E. 10TH AVE.
City-St-Zip: GAINESVILLE, FL 32601

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: JUDY D NEAL

P/D.

04/30/2005

Electronic Signature of Signing Officer or Director

Date