

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000863

Entity Name: NEW LIFE PCA, INC.

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

100 E. MINNEHAHA AVE
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

PO BOX 120279
CLERMONT, FL 34712

New Mailing Address:

FEI Number: 21-2422609

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAVALLI, FRANK
1985 ANCIENT OAK DRIVE
OCOOE, FL 34761 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: DP () Delete
Name: CAVALLI, FRANK
Address: 307-C HIGHWAY 27
City-St-Zip: CLERMONT, FL 34711

Title: DVP () Delete
Name: BLOCK, DON
Address: 10343 THOMPSON PLACE
City-St-Zip: CLERMONT, FL 34711

Title: DS () Delete
Name: BRINKS, JUSTIN
Address: 25714 BELLE AVENUE
City-St-Zip: LEESBURG, FL 34748

Title: DT () Delete
Name: MCNEES, GARY
Address: 5440 QUEEN VICTORIA DRIVE
City-St-Zip: LEESBURG, FL 34748

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CAVALLI, FRANK
Address: 1985 ANCIENT OAK DR.
City-St-Zip: OCOOE, FL 34761

Title: DVP (X) Change () Addition
Name: BLOCK, DON
Address: 21326 ROYAL TROON R
City-St-Zip: LEESBURG, FL 34748

Title: DS (X) Change () Addition
Name: BISHOP, JOHN
Address: 889 SCENIC VIEW CIRCLE
City-St-Zip: CLERMONT, FL 34711

Title: DT (X) Change () Addition
Name: WEBER, TOM
Address: 18725 SOUTH O'BRIEN RD
City-St-Zip: GROVELAND, FL 34736

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: FRANK CAVALLI

DP

04/28/2005

Electronic Signature of Signing Officer or Director

Date