

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000000863

**FILED**  
**Jan 24, 2012**  
**Secretary of State**

**Entity Name:** NEW LIFE PCA, INC.

**Current Principal Place of Business:**

18237 E. APSHAWA ROAD  
CLERMONT, FL 34715

**New Principal Place of Business:**

18237 E. APSHAWA ROAD  
CLERMONT, FL 34715

**Current Mailing Address:**

PO BOX 120279  
CLERMONT, FL 34712

**New Mailing Address:**

18237 E. APSHAWA ROAD  
CLERMONT, FL 34715

**FEI Number:** 65-1172835

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JAMES, ARTHUR J  
3622 FAIRFIELD DRIVE  
CLERMONT, FL 34711 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  
Name: JAMES, ARTHUR J  
Address: 3622 FAIRFIELD DRIVE  
City-St-Zip: CLERMONT, FL 34711

Title: D VP  
Name: BISHOP, JOHN  
Address: 889 SCENIC VIEW CIR  
City-St-Zip: CLERMONT, FL 34711

Title: S/D  
Name: COOPER, JERRY  
Address: 11448 BEGGS COURT  
City-St-Zip: CLERMONT, FL 34711

Title: DT  
Name: COOPER, JERRY  
Address: 11448 BEGGS COURT  
City-St-Zip: CLERMONT, FL 34711

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:** ARTHUR J. JAMES

PD

01/24/2012

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

\_\_\_\_\_  
Date