2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 01, 2007
Secretary of State

DOCUMENT# N03000003195

Entity Name: NEW LIFE COUNSELING CENTER INC.

Current Principal Place of Business:

2357 NE 16TH CT.
JENSEN BEACH, FL 34957

New Principal Place of Business:

Current Mailing Address:

2357 NE 16TH CT.
JENSEN BEACH, FL 34957

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JUSTIS, ROBERT
2357 NE 16TH CT
JENSEN BEACH, FL 34957 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:	PRES	( ) Delete
Name:	JUSTIS, ROBERT	
Address:	2357 NE 16TH CT.	
City-St-Zip:	JENSEN BEACH, FL 34957	
Title:	DIR2	( ) Delete
Name:	KOKE, BILL	
Address:	4013 MOON RIVER CIR.	
City-St-Zip:	JENSEN BEACH, FL 34957	
Title:	DIR3	( ) Delete
Name:	WATTS, ROBERT	
Address:	3017 EAGLE'S NEST WAY	
City-St-Zip:	PORT SAINT LUCIE, FL 34952	
Title:	SECR	( ) Delete
Name:	JUSTIS, HELEN	
Address:	2357 NE 16TH CT.	
City-St-Zip:	JENSEN BEACH, FL 34957	

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 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: ROBERT JUSTIS PRES 06/01/2007
Electronic Signature of Signing Officer or Director — Date