2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004631

FILED Feb 25, 2009 Secretary of State

Entity Na		
	nme: NEW LIFE HOUSE OF PRAYE	R MINISTRIES INC.
Current Principal Place of Business:		New Principal Place of Business:
	HWY 17 SOUTH /, FL 33830	
Current Mailing Address:		New Mailing Address:
	HWY 17 SOUTH /, FL 33830	
FEI Numbe	r: 06-1714943 FEI Number Applied Fo	or () FEI Number Not Applicable () Certificate of Status Desired (X)
Name and	d Address of Current Registered A	gent: Name and Address of New Registered Agent:
3180 ÚS I	HARLES W SR. HWY 17 SOUTH /, FL 33830 US	
The above in the Stat		for the purpose of changing its registered office or registered agent, or both,
	le of Florida.	
SIGNATU		
SIGNATU		ered Agent Date
	IRE:	ered Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
	Electronic Signature of Registe RS AND DIRECTORS: VD () Delete LUKE, MECHELLE 3180 US HWY 17 SOUTH	-
OFFICER Title: Name: Address:	Electronic Signature of Register RS AND DIRECTORS: VD () Delete LUKE, MECHELLE 3180 US HWY 17 SOUTH BARTOW, FL 33830 TD () Delete DION, BRENDA 635 S. FLORAL AVE.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: () Change () Addition Name: Address:
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	Electronic Signature of Register RS AND DIRECTORS: VD () Delete LUKE, MECHELLE 3180 US HWY 17 SOUTH BARTOW, FL 33830 TD () Delete DION, BRENDA 635 S. FLORAL AVE. BARTOW, FL 33830 SD () Delete PAYNE, DEBORAH G 715 CRYSTAL BEACH RD.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:

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: MECHELLE LUKE VD 02/25/2009