2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N03000005926

TI FILED

Jan 26, 2008

Secretary of State

Entity Name: ASSEMBLY OF GOD NEW LIFE IN PALM COAST, INC. **Current Principal Place of Business: New Principal Place of Business:** 9F PALM HARBOR VILLAGE WAY PALM COAST, FL 32137 **Current Mailing Address: New Mailing Address:** 9F PALM HARBOR VILLAGE WAY PALM COAST, FL 32137 FEI Number: 20-0086058 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TAX HOUSE CORPORATION 1261 E SAMPLE ROAD POMPANO BEACH, FL 33064 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ROSA, NOE F Name: Name: Address: 1392 SEAVIEW DR. Address: City-St-Zip: NORTH LAUDERDALE, FL 33068 US City-St-Zip: Title: PD () Delete Title: () Change () Addition Name: SANTOS, VIRGILIO Name: Address: 16 FELLOWSHIP DR Address: City-St-Zip: PALM COAST, FL 32137 US City-St-Zip: Title: () Delete Title: (X) Change () Addition YOAO, PAULO B Name: BATISTA, JOÃO P Name: 23 PRINCE PATRIC Address: Address: 23 PRINCE PATRIC City-St-Zip: PALM COAST, FL 32137 US City-St-Zip: PALM COAST, FL 32137 US () Delete Title: Title: () Change () Addition RODRIGUES, PAULO A Name: Name: 22 FIRETHORN LANE Address: Address: City-St-Zip: PALM COAST, FL 32137 US 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: VIRGILIO SANTOS PD 01/26/2008