## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000007704

FILED Jan 31, 2009 Secretary of State

Entity Name: NEW DIRECTIONS FELLOWSHIP MINISTRIES, INC.

Current Principal Place of Business:			New Principal Place of Business:		
2531 JENI LAKELANI	NIFER DR D, FL 33810				
Current Mailing Address:			New Mailing Address:		
2531 JENN LAKELANI	NIFER DR D, FL 33810				
FEI Number: 87-0704764 FEI Number Applied For ( )		FEI Number Not Applicable ( ) Certificate of Status Desired ( )			
Name and	Address of C	urrent Registered Agent:	Name and A	Address of New Registered Agent:	
5517 LAKE	AL, ROSETTA E LUTHER RD D, FL 33805	US			
The above in the State	named entity se of Florida.	ubmits this statement for the p	ourpose of changing its	s registered office or registered agent, or both,	
SIGNATU	RE:				
		c Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	VD () RANDALL, RUB` 2531 JENNIFER LAKELAND, FL	DR	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	TD () MCDOUGAL, RC 5571 LAKE LUT LAKELAND, FL	HER RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () BRANTON, TAM 1658 WEST LN LAKELAND, FL		Name: Address:	SD (X) Change ( ) Addition BRANTON, TAMATHA 1226 LAKEWOOD ROAD LAKELAND, FL 33805	
Title: Name: Address: City-St-Zip:	PD () RANDALL, WILE 2531 JENNIFER LAKELAND, FL	DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () MOORE, PETE 614 W CARVER LAKELAND, FL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: TAMATHA BRANTON SD 01/31/2009