

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010463

FILED  
Aug 31, 2007  
Secretary of State

**Entity Name:** NEW LIFE WORSHIP CENTER MINISTRY INC.

**Current Principal Place of Business:**

343 SW 27TH AVE  
FORT LAUDERDALE, FL 33312

**New Principal Place of Business:**

**Current Mailing Address:**

343 SW 27TH AVE  
FORT LAUDERDALE, FL 33312

**New Mailing Address:**

**FEI Number:** 14-1896752      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **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:**

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

MCMILLAN, SEAN  
540 N.W 4TH AVE APT 1216  
FORT LAUDERDALE, FL 33311      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:**

Title: P      ( ) Delete  
Name: MCMILLAN, SEAN  
Address: 540 N.W 4TH AVE APT 1216  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: T      ( ) Delete  
Name: BRADFORD, JOANN  
Address: 4420 N.W 59ST  
City-St-Zip: FT LAUDERDALE, FL 33319

Title: T      ( ) Delete  
Name: RUTLEDGE, CHRISTINA  
Address: 2425 N.W 33ST APT 1302  
City-St-Zip: OAKLAND PARK, FL 33309

Title: VP      ( ) Delete  
Name: MCMILLAN, TONY  
Address: 2425 N.W 33ST APT 1302  
City-St-Zip: OAKLAND PARK, FL 33309

Title: T      ( ) Delete  
Name: MCMILLAN, TIA  
Address: 1110 N.W 12ST  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: T      ( ) Delete  
Name: WILSON, MARILYN D  
Address: 6490 NW 11TH ST  
City-St-Zip: MARGATE, FL 33063

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T      (X) Change ( ) Addition  
Name: CARSON, DERRICK  
Address: 905 SW 15TH ST APT 403  
City-St-Zip: POMPANO BEACH, FL 33060

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: SEAN MCMILLAN

D

08/31/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date