2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2011
Secretary of State

DOCUMENT# N04000001598

Entity Name: NEW LIFE CENTER OUTREACH MINISTRIES INC.

Current Principal Place of Business:

3229 S.W. STATE ROAD 47
LAKE CITY, FL 32025

New Principal Place of Business:

Current Mailing Address:

3229 S.W. STATE ROAD 47
LAKE CITY, FL 32025

New Mailing Address:

FEI Number: 30-0252812 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCDANIEL, RUSSELL LEROY
3213 S.W. STATE ROAD 47
LAKE CITY, FL 32025 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: PD
Name: MCDANIEL, RUSSELL LEROY
Address: 3213 S.W. STATE ROAD 47
City-St-Zip: LAKE CITY, FL 32025

Title: VD
Name: MCDANIEL, DORIS ELAINE
Address: 3213 S.W. STATE ROAD 47
City-St-Zip: LAKE CITY, FL 32025

Title: SD
Name: COLEMAN, DONNE
Address: P.O. BOX 185
City-St-Zip: MC ALPIN, FL 320620185

Title: TD
Name: PARSONS, CLAUDIA
Address: 236 S.W. ACE LANE
City-St-Zip: LAKE CITY, FL 33025

I hereby 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 all other like empowered.

SIGNATURE: CLAUDIA PARSONS TD 02/13/2011

Electronic Signature of Signing Officer or Director — Date