

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007937

FILED  
Aug 22, 2008  
Secretary of State

Entity Name: NEWNESS OF LIFE TEMPLE OF FAITH, INC.

## Current Principal Place of Business:

3633 EAGLENEST COURT  
MELBOURNE, FL 32904

## New Principal Place of Business:

1450 SHEAFE AVE  
UNIT 104  
PALM BAY, FL 32905

## Current Mailing Address:

P. O. BOX 121411  
W. MELBOURNE, FL 329121411

## New Mailing Address:

FEI Number: 03-0545180      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:

MCMILLAN, JESSIE  
3633 EAGLENEST COURT  
MELBOURNE, FL 32904      US

## Name and Address of New Registered Agent:

MCMILLAN, JESSIE  
1450 SHEAFE AVE  
UNIT 104  
PALM BAY, FL 32905      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: \_\_\_\_\_

08/22/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PCEO      ( ) Delete  
Name: MCMILLAN, DARRELL L PASTOR  
Address: 3633 EAGLENEST CT.  
City-St-Zip: MELBOURNE, FL 32904

Title: VPD      ( ) Delete  
Name: MCMILLAN, JESSIE L  
Address: 3633 EAGLENEST CT.  
City-St-Zip: MELBOURNE, FL 32904

Title: D      ( ) Delete  
Name: LITTLES, ANGELA  
Address: 1830 CEDARWOOD DRIVE  
City-St-Zip: MELBOURNE, FL 32935

Title: SD      ( ) Delete  
Name: GRAHAM, LAQUASHA T  
Address: 3150 S. BADCOCK ST., APT. 75  
City-St-Zip: MELBOURNE, FL 32905

Title: TD      ( ) Delete  
Name: SMITH, PATRICIA  
Address: 909 HICKORY ST., APT. B  
City-St-Zip: MELBOURNE, FL 32901

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO      (X) Change ( ) Addition  
Name: MCMILLAN, DARRELL L PASTOR  
Address: 1450 SHEAFE AVE  
City-St-Zip: PALM BAY, FL 32905

Title: VPD      (X) Change ( ) Addition  
Name: MCMILLAN, JESSIE L  
Address: 1450 SHEAFE AVE UNIT 104  
City-St-Zip: PALM BAY, FL 32905

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: JESSIE MCMILLAN

VP

08/22/2008

Electronic Signature of Signing Officer or Director

Date