

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007937

FILED
Apr 30, 2009
Secretary of State

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

Current Principal Place of Business:

1450 SHEAFE AVE
UNIT 104
PALM BAY, FL 32905

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

1450 SHEAFE AVE
UNIT 104
PALM BAY, FL 32905

FEI Number: 03-0545180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCMILLAN, JESSIE
1450 SHEAFE AVE
UNIT 104
PALM BAY, FL 32905 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: PCEO () Delete
Name: MCMILLAN, DARRELL L PASTOR
Address: 1450 SHEAFE AVE
City-St-Zip: PALM BAY, FL 32905

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

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: () 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:

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 L MCMILLAN

VPD

04/30/2009

Electronic Signature of Signing Officer or Director

Date