

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004232

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: NEW LEVEL CHRISTIAN CENTER, INC.

## Current Principal Place of Business:

8800 ARLINGTON EXPRESSWAY  
JACKSONVILLE, FL 32211

## New Principal Place of Business:

## Current Mailing Address:

2240 DUMFRIES CIRCLE E.  
JACKSONVILLE, FL 32246

## New Mailing Address:

FEI Number: 59-3804129

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RICHARDSON, LISA  
2240 DUMFRIES CIRCLE E.  
JACKSONVILLE, FL 32246 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: P ( ) Delete  
Name: RICHARDSON, DEWAYNE  
Address: 2240 DUMFRIES CIRCLE E.  
City-St-Zip: JACKSONVILLE, FL 32246

Title: V ( ) Delete  
Name: RICHARDSON, LISA  
Address: 2240 DUMFRIES CIRCLE E.  
City-St-Zip: JACKSONVILLE, FL 32246

Title: D ( ) Delete  
Name: YARBOURGH, ADDIE  
Address: 1735 DAVIDSON ST.  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D ( ) Delete  
Name: MORGAN, JOHN  
Address: 9109 GREENLEAF ROAD  
City-St-Zip: JACKSONVILLE, FL 32208

Title: D ( ) Delete  
Name: WHITE, JEFF  
Address: 1911 SPOONBILL STREET  
City-St-Zip: JACKSONVILLE, FL 32224

## 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: DEWAYNE RICHARDSON

P

04/29/2008

Electronic Signature of Signing Officer or Director

Date