

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000999

FILED
Jan 24, 2008
Secretary of State

Entity Name: NEW TESTAMENT BELIEVERS' FELLOWSHIP, INC.

Current Principal Place of Business:

16355 FLORENCE OAK COURT
MONTVERDE, FL 34756

New Principal Place of Business:

355 CIRTUS TOWER BLVD., #110
CLERMONT, FL 34711

Current Mailing Address:

16355 FLORENCE OAK COURT
MONTVERDE, FL 34756

New Mailing Address:

FEI Number: 20-4243467 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EVANS, LANNY MR.
16355 FLORENCE OAK COURT
MONTVERDE, FL 34756 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 () Delete
Name: MATTHEWS, WALTER MR.
Address: 15714 PADDOCK DRIVE
City-St-Zip: MONTVERDE, FL 34756

Title: SD () Delete
Name: EVANS, LANNY MR.
Address: 16355 FLORENCE OAK COURT
City-St-Zip: MONTVERDE, FL 34756

Title: TD () Delete
Name: SKELTON, WILLIAM J MR.
Address: 15739 PADDOCK DRIVE
City-St-Zip: MONTVERDE, FL 34756

Title: D () Delete
Name: PRICE, MATTHEW S
Address: 2712 SOUTH DELLWOOD
City-St-Zip: EUSTIS, FL 32726

Title: () Delete
Name:
Address:
City-St-Zip:

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: D (X) Change () Addition
Name: KING, BOBBY J MR.
Address: 3610 EVERS HOLT STREET
City-St-Zip: CLERMONT, FL 34711

Title: D () Change (X) Addition
Name: SANTANELLI, VINCENT MR.
Address: 204 BAYOU BEND ROAD
City-St-Zip: GROVELAND, FL 34736

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: LANNY EVANS

SD

01/24/2008

Electronic Signature of Signing Officer or Director

Date