## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000005486

FILED Jan 06, 2009 Secretary of State

Entity Name: NEW WAY CHRISTIAN FELLOWSHIP INC.

Current Principal Place of Business:			New Principal Place of Business:	
38 KARAT PALM CO	PATH AST, FL 32164	1		
Current Mailing Address:			New Mailing Address:	
38 KARAT PALM CO	PATH AST, FL 32164	1		
FEI Number	: 11-3781215	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	l Address of C	Current Registered Agent:	Name and Address of	New Registered Agent:
223 NE 14	LIN, RICHARD TH AVE O BEACH, FL		SUMMERLIN, RICHAR 38 KARAT PATH PALM COAST, FL 3210	
	e named entity s e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,
SIGNATURE:				01/06/2009
	Electron	nic Signature of Registered Ag	ent	Date
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	PD () SUMMERLIN, F 38 KARAT PATI PALM COAST,	H	Title: ( Name: Address: City-St-Zip:	) Change ()Addition
			Only Ot 2.p.	
Name: Address:	VPST () SUMMERLIN, k 38 KARAT PATI PALM COAST,	Н	• ,	) Change ( ) Addition
Name: Address: City-St-Zip: Title: Name: Address:	SUMMERLIN, K 38 KARAT PATI PALM COAST,	KIMBERLY H FL 32164 ) Delete NCETTA IDGE WAY	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition  ) Change ( ) Addition
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	SUMMERLIN, K 38 KARAT PATI PALM COAST, T ( ) CIMAGLIA, COI 50 COQUINA R ORMOND BEAG	KIMBERLY H FL 32164  Delete NCETTA IDGE WAY CH, FL 32174  Delete	Title: ( Name: Address: City-St-Zip:  Title: ( 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: KIMBERLY SUMMERLIN VPST 01/06/2009