

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000007891

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** NEW FOCUS CHRISTIAN FELLOWSHIP INC

**Current Principal Place of Business:**

5541 ARLINGTON ROAD  
SUITE 5  
JACKSONVILLE, FL 32211 US

**New Principal Place of Business:**

**Current Mailing Address:**

7917 TORY CIRCLE  
JACKSONVILLE, FL 32208 US

**New Mailing Address:**

**FEI Number:** 36-4590936

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

WOODEN, WALTER L  
7917 TORY CIRCLE  
JACKSONVILLE, FL 32208 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:** DP  
**Name:** WOODEN, WALTER L  
**Address:** 7917 TORY CIRCLE  
**City-St-Zip:** JACKSONVILLE, FL 32208

**Title:** DS  
**Name:** WOODEN, RU'PUNZEL L  
**Address:** 7917 TORY CIRCLE  
**City-St-Zip:** JACKSONVILLE, FL 32208

**Title:** DT  
**Name:** NESMITH, CLIFTON E  
**Address:** 1277 WEST 28TH STREET  
**City-St-Zip:** JACKSONVILLE, FL 32209

I hereby 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 all other like empowered.

**SIGNATURE:** WALTER WOODEN

DP

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date