

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011868

FILED
Jan 07, 2008
Secretary of State

Entity Name: NEW DAY UNITY FELLOWSHIP, INC.

Current Principal Place of Business:

3109 LUTZ LAKE FERN RD
LUTZ, FL 33549

New Principal Place of Business:

8012 W WATERS
TAMPA, FL 33615

Current Mailing Address:

P.O. BOX 891
ODESSA, FL 33556

New Mailing Address:

8012 W WATERS
TAMPA, FL 33615

FEI Number: 20-5827820

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STARKE, SCOTT R
405 S. WARE BLVD
SUITE 401
TAMPA, FL 33610 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: WILSON, GINGER
Address: 19615 MICHIGAN AVE.
City-St-Zip: ODESSA,, FL 33556

Title: STD () Delete
Name: LORD, SUSAN
Address: 4217 WINDING RIVER WAY
City-St-Zip: LAND O' LAKES, FL 34639

Title: DIR () Delete
Name: JANSEN, LUIS
Address: 7909 NORTHBRIDGE BLVD
City-St-Zip: TAMPA, FL 33615

Title: D () Delete
Name: ERICKSEN, SONDR
Address: 18132 GUNN HWY
City-St-Zip: ODESSA, FL 33553

Title: D () Delete
Name: COOK, MARY ANN
Address: 3202 COLWELL AVE. #311
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RICH, KATHY
Address: 16407 CYPRESS WATER WAY #507
City-St-Zip: TAMPA, FL 33624

Title: TD (X) Change () Addition
Name: POSCICH, DAWN M
Address: 6704 BRAESGATE LN
City-St-Zip: TAMPA, FL 33624

Title: SD (X) Change () Addition
Name: QUINBY, PATRICIA
Address: 10317 NEWPORT CIR
City-St-Zip: TAMPA, FL 33612

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: KATHY E RICH

PD

01/07/2008

Electronic Signature of Signing Officer or Director

Date