## 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N06000012241

TI FILED
Oct 03, 2007
Secretary of State

Entity Name: NEW LIFE FELLOWSHIP OF CLAY COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

2825 TUSCAROTA TRAIL MIDDLEBURG, FL 32068

Current Mailing Address: New Mailing Address:

PO BOX 65875 ORANGE PARK, FL 32065

FEI Number: 20-5963587 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MORRO, ROBERT 2825 TUSCARORA TRAIL MIDDLEBRUG, FL 32068 US

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:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MORRO, ROBERT
 Name:

 Address:
 2825 TUSCARORA TRAIL
 Address:

 City-St-Zip:
 MIDDLEBURG, FL 32068
 City-St-Zip:

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name: SPATE, NATHAN Name: CARRIER, ROBERT
Address: 1441 MANOTAK AVE Address: 3850 DOCTORS LA

 Address:
 1441 MANOTAK AVE
 Address:
 3850 DOCTORS LAKE DR LOT 1

 City-St-Zip:
 JACKSONVILLE, FL 32221
 City-St-Zip:
 ORANGE PARK, FL 32065

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$ 

Name: WOOD, LLOYD Name: LANE, KYLE

 Address:
 2233 ALDERNEY CT
 Address:
 7502 DEVONDALE WAY

 City-St-Zip:
 MIDDLEBURG, FL 32065
 City-St-Zip:
 JACKSONVILLE, FL 32256

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: ROBERT MORRO D 10/03/2007