2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06716

FILED Dec 14, 2004 Secretary of State

Entity Name: NEW LIFE CHRISTIAN FELLOWSHIP, INC.

Littly Na	IIIE. NEVV LII	L CHRISTIANT ELLOWSHIF,	INC.		
Current P	rincipal Place	of Business:	New Principal Pla	New Principal Place of Business:	
% LARRY LINKOUS 4525 APOLLO ROAD TITUSVILLE, FL 32780			6755 S. WASHING	% LARRY LINKOUS 6755 S. WASHINGTON AVE. TITUSVILLE, FL 32780	
Current Mailing Address:			New Mailing Add	New Mailing Address:	
% LARRY LINKOUS 4525 APOLLO ROAD TITUSVILLE, FL 32780			% LARRY LINKOUS 6755 S. WASHINGTON AVE TITUSVILLE, FL 32780		
FEI Number	: 59-2554734	FEI Number Applied For ()	FEI Number Not Applicable (Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
LINKOUS, LARRY 1403 INDIAN RIVER AVENUE TITUSVILLE, FL 32780 US			788 FLORENCIA (LINKOUS, LARRY 788 FLORENCIA CIRCLE TITUSVILLE, FL 32780 US	
	e named entity : e of Florida.	submits this statement for the	ourpose of changing its regist	tered office or registered agent, or both,	
SIGNATURE: LARRY LINKOUS				12/14/2004	
	Electror	nic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () LINKOUS, LAR 788 FLORENC TITUSVILLE, F	IA CIR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () LINKOUS, SAN 788 FLORENC TITUSVILLE, F	IA CIR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () RAMSEY, ROY 980 CRISTABO TITUSVILLE, F	L DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ss: 980 CRISTIBOL DRIVE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () HICKS, HOLLIS 4780 BISCYAN TITUSVILLE, FI	E DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HOLLIS H. HICKS TD 12/14/2004