

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06716

FILED
Feb 05, 2009
Secretary of State

Entity Name: NEW LIFE CHRISTIAN FELLOWSHIP, INC.

Current Principal Place of Business:

% LARRY LINKOUS
6755 S. WASHINGTON AVE.
TITUSVILLE, FL 32780

New Principal Place of Business:

Current Mailing Address:

% LARRY LINKOUS
6755 S. WASHINGTON AVE
TITUSVILLE, FL 32780

New Mailing Address:

% 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:

LINKOUS, LARRY
788 FLORENCIA CIRCLE
TITUSVILLE, FL 32780 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: LINKOUS, LARRY
Address: 788 FLORENCIA CIR
City-St-Zip: TITUSVILLE, FL 32780

Title: VD () Delete
Name: LINKOUS, SANDRA
Address: 788 FLORENCIA CIR
City-St-Zip: TITUSVILLE, FL 32780

Title: SD () Delete
Name: RAMSEY, ROY
Address: 980 CRISTABOL DRIVE
City-St-Zip: TITUSVILLE, FL 32780

Title: VD () Delete
Name: RAMSEY, JOYCE
Address: 980 CRISTIBOL DRIVE
City-St-Zip: TITUSVILLE, FL 32780

Title: TD () Delete
Name: HICKS, HOLLIS H
Address: 4780 BISCYANE DRIVE
City-St-Zip: TITUSVILLE, FL 32780

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LARRY LINKOUS

PD

02/05/2009

Electronic Signature of Signing Officer or Director

Date