

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010681

FILED
Jan 05, 2011
Secretary of State

Entity Name: NEW LIFE VILLAGE, INC.

Current Principal Place of Business:

13133 ST. FRANCIS LANE
THONOTOSASSA, FL 33592 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 1464
THONOTOSASSA, FL 33592 US

New Mailing Address:

13133 ST. FRANCIS LANE
THONOTOSASSA, FL 33592 US

FEI Number: 94-3454171

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LEBOEUF, CLAIRE M SISTER
13133 ST. FRANCIS LANE
THONOTOSASSA, FL 33592 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: P/S
Name: MILLER, CAROLYN
Address: 404 APACHE TRAIL
City-St-Zip: BRANDON, FL 33511 US

Title: VP
Name: ADAMS, EDDIE JR.
Address: 9504 WOODLAND RIDGE DRIVE
City-St-Zip: TAMPA, FL 33637 US

Title: T
Name: ISABEL, SCOTT
Address: 13075 TELECOM PARKWAY, N.
City-St-Zip: TEMPLE TERRACE, FL 33637 US

Title: D
Name: INGRAM, MIKE DR.
Address: 5611 PINEY LANE DRIVE
City-St-Zip: TAMPA, FL 33625 US

Title: D
Name: TOM, HAYDEN P
Address: 13129 ST. FRANCIS LANE
City-St-Zip: THONOTOSASSA, FL 33592 US

Title: D
Name: LESANDRO, BRIAN
Address: 405 SOUTH DALE MABRY HWY. SUITE 401
City-St-Zip: TAMPA, FL 33609 US

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: CLAIRE LEBOEUF, CSC

E.D.

01/05/2011

Electronic Signature of Signing Officer or Director

Date