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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N15627 (5)

1. Corporation Name

NEW LIFE FAMILY CENTER, INC.

Principal Place of Business

Mailing Address

3661 W. OAKLAND PARK BLVD
SUITE 200
LAUDERDALE LAKES FL 33311

3661 W. OAKLAND PARK BLVD
SUITE 200
LAUDERDALE LAKES FL 33311

3. Date Incorporated or Qualified

06/26/1986

4. FEI Number

65-0003179

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 5975 W. Sunrise Blvd.

26 5975 W. Sunrise Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 105

27 Suite 105

City & State

City & State

23 Sunrise, FL

28 Sunrise, FL

Zip

Zip

24 33313

29 33313

Country

Country

25 Broward

30 Broward

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

R-MUNOZ, DENISE DR
3661 W OAKLAND PARK BLVD SUITE 200
SUITE 200
LAUDERDALE LAKES FL 33311

81 Name

82 Street Address (P.O. Box Number Is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Denise R. Munoz
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1-12-97
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME MUNOZ, DENISE
STREET ADDRESS 1460 N W 126TH AVE
CITY-ST-ZIP SUNRISE FL

TITLE ☒ DELETE

NAME DAVIES, DONNA
STREET ADDRESS 7321 16TH ST APT A-110
CITY-ST-ZIP PLANTATION FL

TITLE ☐ DELETE

NAME JONES, TYSON T
STREET ADDRESS 2000 CITY HALL DRIVE
CITY-ST-ZIP LAUDERHILL FL

TITLE ☐ DELETE

NAME PETERSON, LINDA
STREET ADDRESS ONE FINANCIAL PLAZA, 9TH FLOOR
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ DELETE

NAME SMITH, CAROL
STREET ADDRESS 600 S.E. 3RD AVE.
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ DELETE

NAME CRUGER, LORENZO J
STREET ADDRESS 8000 W. SUNRISE BLVD., ROOM 2372
CITY-ST-ZIP FT. LAUDERDALE FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Denise R. Munoz

1-12-97 (954) 792-2221

CR2E037 (10/97)