

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19589

FILED
Jun 21, 2007
Secretary of State

Entity Name: CHURCH OF NEW LIFE CHRISTIAN FELLOWSHIP, INC.

Current Principal Place of Business:

2158 NW 6TH CT
P. O. BOX 1572
FT LAUDERDALE, FL 33311 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 1572
P. O. BOX 1572
FT LAUDERDALE, FL 33302 US

New Mailing Address:

FEI Number: 65-0132933 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GREENE, CAROLYN VPD
2158 NW 6TH CT.
FT LAUDERDALE, FL 33311 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: GREENE, ARTHUR L PD
Address: 2158 NW 6TH CT.
City-St-Zip: FT. LAUDERDALE, FL 33311 US

Title: VPD () Delete
Name: GREENE, CAROLYN VPD
Address: 2158 N.W. 15TH ST.
City-St-Zip: FT LAUDERDALE, FL 33311 US

Title: SD () Delete
Name: BUSH, CYNTHIA SD
Address: 2151 NW 6TH ST.
City-St-Zip: FORT LAUDERDALE, FL 33311 US

Title: TD () Delete
Name: GREENE, JUANITA N
Address: 111 FLORIDA AVE
City-St-Zip: FORT LAUDERDALE, FL 33312 US

Title: D () Delete
Name: GREENE, TIMOTHY
Address: 1519 NW 15TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33311 US

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: CAROLYN GREENE

VPD

06/21/2007

Electronic Signature of Signing Officer or Director

Date