

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31814

FILED  
Mar 22, 2009  
Secretary of State

Entity Name: NEW LIFE SPIRITUAL CENTRE, INC.

**Current Principal Place of Business:**

2892 CANYON DR.  
ORLANDO, FL 32822 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 941121  
MAITLAND, FL 32751

**New Mailing Address:**

FEI Number: 65-0124906

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

LAMBERT, LILLIAN REV  
2892 CANYON DR  
ORLANDO, FL 32822 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: RHPP ( ) Delete  
Name: LAMBERT, LILLIAN  
Address: 2892 CANYON DR  
City-St-Zip: ORLANDO, FL 32822

Title: BM ( ) Delete  
Name: GAVILANES, CARMEN  
Address: 1624 ELMSTEAD CT.  
City-St-Zip: ORLANDO, FL 32824

Title: SAPV ( ) Delete  
Name: CAMPBELL, SYLVIA  
Address: 187 PAINTED POST PT  
City-St-Zip: SANFORD, FL 32771

Title: BM ( ) Delete  
Name: BARNARD, SALLY  
Address: 503 WATER ST.  
City-St-Zip: CELEBRATION, FL 34747

Title: RTJA ( ) Delete  
Name: SEGOBIN, SHARON  
Address: 1505 TANGLEWOOD CT.  
City-St-Zip: OCOEE, FL 34761

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: SAPV (X) Change ( ) Addition  
Name: CAMPBELL, SYLVIA  
Address: 1364 TIERRA CIRCLE  
City-St-Zip: WINTER PARK, FL 32792

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: REV. LILLIAN LAMBERT, PASTOR/PRESIDENT

RHPP

03/22/2009

Electronic Signature of Signing Officer or Director

Date