

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34057

FILED
May 22, 2007
Secretary of State

Entity Name: NEW LIFE CHRISTIAN FELLOWSHIP, MINISTRIES OF THE WORLD, INC.

Current Principal Place of Business:

% JOHN CRENSHAW
1508 W LARUA ST
PENSACOLA, FL 32501 US

New Principal Place of Business:

Current Mailing Address:

% JOHN CRENSHAW
3001 HIGH POINTE PLACE
PENSACOLA, FL 32505 US

New Mailing Address:

FEI Number: 74-3004254 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

CRENSHAW, JOHN
3001 HIGH POINTE PL
PENSACOLA, FL 32505 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 () Delete
Name: CRENSHAW, JOHN,
Address: 3001 HIGH POINTE PL
City-St-Zip: PENSACOLA, FL 32505

Title: VP () Delete
Name: CRENSHAW, JANICE,
Address: 3001 HIGH POINTE PL
City-St-Zip: PENSACOLA, FL 32505

Title: S () Delete
Name: LEWIS, JEANICE
Address: 3665 E JOHNSON AVE
City-St-Zip: PENSACOLA, FL 32514

Title: D () Delete
Name: DUDLEY, BARBARA
Address: 533-D PETROS CIRCLE
City-St-Zip: PENSACOLA, FL 32505

Title: D () Delete
Name: ADAMS, TYRONE
Address: 2771 CORAL DR
City-St-Zip: FORT WALTON BEACH, FL

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: D (X) Change () Addition
Name: ADAMS, SAMANTHA
Address: 2771 CORAL DR.
City-St-Zip: FORT WALTON BEACH, FL

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: DR. JANICE CRENSHAW

VP

05/22/2007

Electronic Signature of Signing Officer or Director

Date