

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37759

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** NEW LIFE FAMILY MINISTRIES, INC.

**Current Principal Place of Business:**

% NEW LIFE FAMILY WORSHIP  
28330 BERMONT RD  
PUNTA GORDA, FL 33982

**New Principal Place of Business:**

**Current Mailing Address:**

% NEW LIFE FAMILY WORSHIP  
28330 BERMONT RD  
PUNTA GORDA, FL 33982

**New Mailing Address:**

FEI Number: 65-0191392

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RAIMONDO, ROBERT J  
18521 EBB AVENUE  
PORT CHARLOTTE, FL 33948 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  
Name: RAIMONDO, ROBERT J  
Address: 18521 EBB AVE  
City-St-Zip: PORT CHARLOTTE, FL 33948 US

Title: VD  
Name: RAIMONDO, CHAMLOT  
Address: 18521 EBB AVE  
City-St-Zip: PORT CHARLOTTE, FL 33948 US

Title: TD  
Name: RANDOLPH, MORGAN  
Address: 27127 VALENCIA DR  
City-St-Zip: PUNTA GORDA, FL 33955 US

Title: S  
Name: RANDOLPH, HUELLEN  
Address: 27127 VALENCIA DR  
City-St-Zip: PUNTA GORDA, FL 33955 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: ROBERT J. RAIMONDO

PRES

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date