

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42391

FILED
Mar 25, 2005
Secretary of State

Entity Name: NEW LIFE UKRAINE CHILDREN'S MINISTRIES, INC.

Current Principal Place of Business:

1794 CONCERT ROAD
DELTONA, FL 32738

New Principal Place of Business:

Current Mailing Address:

1794 CONCERT ROAD
DELTONA, FL 32738

New Mailing Address:

FEI Number: 59-3054127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JARUCZYK, RUSSELL
1794 CONCERT ROAD
DELTONA, FL 32738 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: D () Delete
Name: JARUCZYK, JOHN
Address: 1356 WOODLOINE AVE
City-St-Zip: DELTONA, FL 32725

Title: D () Delete
Name: HICKS, RICHARD
Address: 7814 NADITA COURT
City-St-Zip: ORLANDO, FL 32822

Title: DST () Delete
Name: JARUCZK, NINA
Address: 513 APPLEWOOD AVENUE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DP () Delete
Name: RODERICK, GORDON
Address: 2832 CRESCENT CLUB DR
City-St-Zip: HIXSON, TN 37343

Title: D (X) Delete
Name: BAKER, CHARLES S
Address: 2506 ARBOR MIST TRAIL
City-St-Zip: HIXSON, TN 37343

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: JARUCZYK, JOHN J
Address: 3445 REVERE CIRCLE
City-St-Zip: SNELLVILLE, GA 30039

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

Title: DST (X) Change () Addition
Name: JARUCZYK, NINA
Address: 1974 CONCERT ROAD
City-St-Zip: DELTONA, FL 32738

Title: D (X) Change () Addition
Name: GUILLOT, LILLIAN A
Address: 2084 LEEVILLE ROAD
City-St-Zip: MOUNT JULIET, TN 37122

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN JARUCZYK

DP

03/25/2005

Electronic Signature of Signing Officer or Director

Date