

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44431

FILED
Jan 16, 2006
Secretary of State

Entity Name: NEW LIFE CHURCH MINISTRIES, INCORPORATED

Current Principal Place of Business:

1625 DERBYSHIRE RD
HOLLY HILL, FL 32117 US

New Principal Place of Business:

Current Mailing Address:

1625 DERBYSHIRE RD
HOLLY HILL, FL 32117 US

New Mailing Address:

FEI Number: 59-3080595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOODEN, VICTOR E.
809 PELICAN BAY DRIVE
DAYTONA BEACH, FL 32119 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: WIGGINS, LILLIE,
Address: 104 WINNERS CIRCLE DRIVE #101
City-St-Zip: DAYTONA BEACH, FL 32114

Title: SD () Delete
Name: SINGLETON, MAMIE,
Address: 1654 WIMBERLY CIRCLE
City-St-Zip: DAYTONA BEACH, FL 32117

Title: D () Delete
Name: WILLIAMS, JAMES
Address: 856 MADISON AVE
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D () Delete
Name: STALLING, WALTER JR
Address: 935 SCHOOL ST
City-St-Zip: DAYTONA BEACH, FL 32114

Title: PD () Delete
Name: GOODEN, VICTOR,
Address: 613 WILLIAMSBURG DR.
City-St-Zip: DAYTONA BCH, FL 32117

Title: D () Delete
Name: DIXON, ROBERT
Address: 114 ALEATHA DRIVE
City-St-Zip: DAYTONA BEACH, FL 32114

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
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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 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: LILLIE B. WIGGINS

D

01/16/2006

Electronic Signature of Signing Officer or Director

Date