

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004212

FILED
Jan 14, 2005
Secretary of State

Entity Name: NEW LIFE CHRISTIAN MINISTRIES, INC.

Current Principal Place of Business:

1109 SE 7TH ST.
OKEECHOBEE, FL 34974 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 534
OKEECHOBEE, FL 34973

New Mailing Address:

FEI Number: 59-3202331

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THE LAW FIRM LAWRENCE J SPIEGEL, CHARTERED
343 ALMERIA AVE
CORAL GABLES, FL 33134 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 () Delete
Name: LAMB, CHARLES E.
Address: 3617 SW 13TH TERR
City-St-Zip: OKEECHOBEE, FL 34974

Title: DT () Delete
Name: LAMB, SHIRLEY
Address: 3617 SW 13TH TERR
City-St-Zip: OKEECHOBEE, FL 34974

Title: SD () Delete
Name: LAMB, JOHN LINDSAY
Address: 1509 SAN DIEGO DR
City-St-Zip: DUNEDIN, FL 34698

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LAMB, CHARLES E REV.
Address: 3617 SW 13TH TERR
City-St-Zip: OKEECHOBEE, FL 34974

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 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: CHARLES E. LAMB

PD

01/14/2005

Electronic Signature of Signing Officer or Director

Date