


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 06, 2006 08:00 AM
Secretary of State

DOCUMENT # N94000001609
 1. Entity Name
NEW LIFE IN JESUS CHRIST MINISTRY, INC.



Principal Place of Business Mailing Address
5801 W HALLANDALE BEACH BLVD. **6055 SW 18 STREET**
HOLLYWOOD, FL 33020 US **MIRAMAR, FL 33023 US**

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07052006 No Chg-NP CR2E037 (4/06)

4. FEI Number Applied For
65-0486142 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
BARRY-AUSTIN, JOSEPH
6055 SW 18 STREET
MIRAMAR, FL 33023

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by September 8, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BARRY-AUSTIN, JOSEPH 6055 SW 18 STREET MIRAMAR, FL 33023
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BARRY-AUSTIN, MARY ANN 6055 SW 18 STREET MIRAMAR, FL 33023
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BARRY-AUSTIN, SAMUEL 3532 NW 19400 TERR CAROL CITY, FL 33056
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Joseph Barry Austin* Date: *07/06/06* Daytime Phone #: *786 277-5834*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR