SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.) NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS N94000004324 (9) DOCUMENT # NEW LIFE COMMUNITY HOLINESS DEVELOPMENT CENTER. INC. Principal Place of Business Mailing Address 2002 E. 15TH AVE. 2002 E. 15TH AVE. TAMPA FL 33605 TAMPA FL 33605 3. Date Incorporated or Qualified 3a. Date of Last Report 09/01/1994 2. Principal Place of Business 05/01/1995 2a. Mailing Address 4. FEI Number 21 Applied For 26 59-3122556 Suite, Apt. #, etc. Not Applicable Suite, Apt. #, etc. 5. Certificate of Status Desired 27 \$8.75 Additional City & State Fee Required City & State 23 6. Election Campaign Financing 28 \$5.00 May Be Trust Fund Contribution Zip Country Added to Fees Zip Country 24 This corporation has liability for intangible tax under s. 199.032. 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent Yes No 10. Name and Address of New Registered Agent 81 Name SLEDGE, RUBEN ELDER Street Address (P.O. Box Number is Not Acceptable) 2002 E. 15TH AVE. 82 **TAMPA FL 33605** 83 84 City 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am Jamiliar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature Typed or printed name of registered agent and little flapplicable

INOTE Registered Agent signature required when the stating)

DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE (3/96) 1.1 JULE NAME SLEDGE, RUBEN ELDER Change Addition 1.2 NAME STREET ADDRESS 2002 E. 15TH AVENUE **CR2E037** 1.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 1.4 CITY - ST-ZIP TITLE DELETE 2.1 TITLE Beverly Johnson 3705 E-88 IF AVE NAME ANDERSON, DANIEL 4 Change Addition 22 NAME STREET ADDRESS 2002 E. 15TH AVENUE 2.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP TAMPA PLORIDA 3340 (D 2 4 CITY - ST- ZIP TITLE DELETE DARIS ALVERSON 3.1 TITLE WRIGHT, ALBERT NAME 4-Change Addition 3 2 NAME 2007 E. 15th AVE 2002 E. 15TH AVE. STREET ADDRESS 3.3 STREET ADDRESS TAMPA FL 33605 CITY-ST-ZIP TAMPO Plopida 33605 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE SLEDGE, BEVERLY NAME 4 Change Addition 4. 2 NAME STREET ADDRESS 2002 E. 15TH AVE. 4.3 STREET ADDRESS TAMPA FL 33605 CITY-ST-ZIP 4 4 CITY - ST - ZIP TITLE DELETE 5 1 TITLE NATAWAL WILLIAMS NAME MARSHALL, PATRICIA **e**hange Addition 5.2 NAME 2002 E. 15TH AVE. STREET ADDRESS 2002 8.15 F AVE. 5.3 STREET ADDRESS **TAMPA FL 33605** CITY-ST-ZIP TAMOR KORIGIN 33X05 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE NAME ANDERSON, SHARON N Change Addition 6.2 NAME STREET ADDRESS 2002 E. 15TH AVE. 6.3 STREET ADDRESS TAMPA FL 33605 CITY-ST-ZIP 2002 E. 15 AVE. 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes I 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 12 or Block 13 in hanged, or on an attachment with an address.

ledge, Elder APRIL

**SIGNATURE**