

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002288

FILED
May 05, 2009
Secretary of State

Entity Name: ASSEMBLY OF GOD NEW LIFE CORPORATION

Current Principal Place of Business:

360 S MILITARY TRAIL
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

Current Mailing Address:

360 S MILITARY TRAIL
DEERFIELD BEACH, FL 33442

New Mailing Address:

FEI Number: 65-0741132 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ROSA, NOE F
360 S MILITARY TRAIL
DEERFIELD BEACH, FL 33442 US

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: P/D () Delete
Name: ROSA, NOE F
Address: 8375 DYSNASTY DR
City-St-Zip: BOCA RATON, FL 33433

Title: PD2 () Delete
Name: SILVA, JOAO B
Address: 360 S MILITARY TRAIL
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: SD () Delete
Name: NETO, JOSE F
Address: 360 S MILITARY TRAIL
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: TD () Delete
Name: MANGIA, SERGIO
Address: 360 S MILITARY TRAIL
City-St-Zip: DEERFIELD BEACH, FL 33442

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
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: NOE F. ROSA

PD

05/05/2009

Electronic Signature of Signing Officer or Director

Date