

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003327

FILED  
Apr 17, 2007  
Secretary of State

**Entity Name:** NEW LIFE FAMILY CHURCH OF MARIANNA, FLORIDA, INC.

**Current Principal Place of Business:**

4028 LAFAYETTE ST.  
MARIANNA, FL 32446

**New Principal Place of Business:**

**Current Mailing Address:**

4028 LAFAYETTE ST.  
MARIANNA, FL 32446

**New Mailing Address:**

**FEI Number:** 59-3212360

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

WARD, JEFF  
4028 LAFAYETTE ST.  
MARIANNA, FL 32446 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: DP ( ) Delete  
Name: WARD, JEFF  
Address: 2951 MONEYHAM RD.  
City-St-Zip: MARIANNA, FL 32448

Title: ED ( ) Delete  
Name: WARD, SANDRA  
Address: 2951 MONEYHAM RD.  
City-St-Zip: MARIANNA, FL 32448

Title: ED (X) Delete  
Name: SPATARO, CARL  
Address: 2669 CHOCTAW TRAIL  
City-St-Zip: MARIANNA, FL 32446

Title: ED (X) Delete  
Name: COOPER, ROSEMARY  
Address: P. O. BOX 54  
City-St-Zip: GREENWOOD, FL 32443

Title: ED (X) Delete  
Name: MILLER, GORDON  
Address: 2933 MADISON ST.  
City-St-Zip: MARIANNA, FL 32446

Title: ED (X) Delete  
Name: KING, ROGER  
Address: 14402 SW CR275  
City-St-Zip: BLOUNTSTOWN, FL 32424

**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:

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: SANDRA WARD

ED

04/17/2007

Electronic Signature of Signing Officer or Director

Date