

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 04, 2009
Secretary of State

DOCUMENT# N98000000120

Entity Name: NEW LIFE FELLOWSHIP CENTER & MINISTRIES INTERNATIONAL INC.**Current Principal Place of Business:**768 NW 183 ST.
MIAMI, FL 33169**New Principal Place of Business:**768 NW 183RD ST
MIAMI, FL 33169**Current Mailing Address:**768 NW 183 ST.
MIAMI, FL 33169**New Mailing Address:**768 NW 183RD ST
MIAMI, FL 33169**FEI Number:** 65-0816940**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**SOREY, BRENDA D
960 N.W. 199TH ST.
MIAMI, FL 33169 US**Name and Address of New Registered Agent:**SOREY, BRENDA D
960 NW 199TH ST
MIAMI, FL 33169 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: _____

08/04/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SOREY, BRENDA D
Address: 960 N.W. 199 STREET
City-St-Zip: MIAMI, FL 33169

Title: VPD () Delete
Name: JERRY, HAROLD
Address: 1670 NW 195 STREET
City-St-Zip: MIAMI, FL 33169

Title: STD () Delete
Name: SHIPMAN, MARQUISTA A
Address: 120 S DOUGLAS RD UNIT PH-2
City-St-Zip: CORAL GABLES, FL 33134

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SOREY, BRENDA D
Address: 960 NW 199TH ST
City-St-Zip: MIAMI, FL 33169

Title: VPST (X) Change () Addition
Name: SHIPMAN, MARQUISTA A
Address: 120 S DOUGLAS RD UNIT PH-2
City-St-Zip: CORAL GABLES, FL 33134

Title: VP (X) Change () Addition
Name: BENJAMIN, KENNEDY
Address: 1750 S GLADES DR #1
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: S () Change (X) Addition
Name: BENJAMIN, ANGELIQUE
Address: 1750 S GLADES DR #1
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: S () Change (X) Addition
Name: SOREY, MICHELLE A
Address: 960 NW 199TH ST
City-St-Zip: MIAMI, FL 33169

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: MARQUISTA A. SHIPMAN

VPST

08/04/2009

Electronic Signature of Signing Officer or Director

Date