

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000000120

**FILED**  
**Jan 31, 2012**  
**Secretary of State**

**Entity Name:** NEW LIFE FELLOWSHIP CENTER & MINISTRIES INTERNATIONAL INC.

**Current Principal Place of Business:**

768 NW 183RD ST  
MIAMI, FL 33169

**New Principal Place of Business:**

**Current Mailing Address:**

768 NW 183RD ST  
MIAMI, FL 33169

**New Mailing Address:**

**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 NW 199TH ST  
MIAMI, FL 33169 US

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

SHIPMAN, MARQUISTA A  
768 NW 183RD STREET  
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: MARQUISTA A. SHIPMAN

01/31/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SHIPMAN, MARQUISTA A  
Address: 120 S DOUGLAS ROAD UNIT PH-2  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: VPSD  
Name: SOREY, MISHAELA A  
Address: 960 NW 199TH STREET  
City-St-Zip: MIAMI, FL 33169 US

Title: STD  
Name: SOREY, MICHELLE A  
Address: 960 NW 199TH ST  
City-St-Zip: MIAMI, FL 33169 US

I hereby 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 all other like empowered.

SIGNATURE: MARQUISTA A. SHIPMAN

PD

01/31/2012

Electronic Signature of Signing Officer or Director

Date