

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001067

FILED  
Apr 30, 2009  
Secretary of State

**Entity Name:** NEW LIFE INDEPENDENT CHURCH CORP.

**Current Principal Place of Business:**

BOX 814  
WILLISTON, FL 33325

**New Principal Place of Business:**

5715 WILL CLAYTON # 7724  
HUMBLE, TX 77338

**Current Mailing Address:**

PO BOX 814  
WILLISTON, FL 33325

**New Mailing Address:**

5715 WILL CLAYTON # 7724  
HUMBLE, TX 77338

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

GAVIN, K  
4123 SW 56 TH  
FT LAUDERDALE, FL 34472 US

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

ANDERSON, S  
5715 WILLCLAYTON #7724  
FT LAUDERDALE, FL 34472 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: S ANDERSON

04/30/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DD ( ) Delete  
Name: TERERA, C  
Address: PO BOX 814 AVE.  
City-St-Zip: WILLISTON, FL 32696

Title: D ( ) Delete  
Name: ANDERSON, S  
Address: PO BOX 814 AVE.  
City-St-Zip: WILLISTON, FL 32696

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DD (X) Change ( ) Addition  
Name: ERERA, C  
Address: 5715 WILL CLAYTON 37724  
City-St-Zip: HUMBLE, TX 77338

Title: D (X) Change ( ) Addition  
Name: ANDERSON, S  
Address: 5715 WILL CLAYTON #7724  
City-St-Zip: HUMBLE, TX 77338

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: S ANDERSON

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date