

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001760

FILED  
Aug 16, 2006  
Secretary of State

**Entity Name:** NEW LIGHT FELLOWSHIP, INC.

**Current Principal Place of Business:**

5829 CORPORATE WAY  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 17866  
WEST PALM BEACH, FL 33416

**New Mailing Address:**

**FEI Number:** 65-0939896      **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:**

SCOTT, RICHARD  
3800 WASHINGTON ROAD  
#407  
WEST PALM BEACH, FL 33405 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: PD ( ) Delete  
Name: SCOTT, RICHARD L  
Address: 3800 WASHINGTON ROAD  
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D ( ) Delete  
Name: MARSHALL, JAMES  
Address: 156 PRIVATE PLACE  
City-St-Zip: WEST PALM BEACH, FL 33413

Title: D ( ) Delete  
Name: SCOTT, CASSANDRA  
Address: 3800 WASHINGTON ROAD  
City-St-Zip: WEST PALM BEACH, FL 33405

Title: T ( ) Delete  
Name: BROWN, HOWARD  
Address: 4521 DISCOVERY LANE #1  
City-St-Zip: WEST PALM BEACH, FL 33417

**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 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: HOWARD O. BROWN

T

08/16/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date