

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004629

FILED
Jan 13, 2009
Secretary of State

Entity Name: NEW LIFE COMMUNITY UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

11100 WINGATE ROAD
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

11100 WINGATE ROAD
JACKSONVILLE, FL 32218

New Mailing Address:

FEI Number: 59-3488486

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, CHANDA
11100 WINGATE ROAD
JACKSONVILLE, FL 32218 US

Name and Address of New Registered Agent:

LEWIS, CANDACE
11100 WINGATE ROAD
JACKSONVILLE, FL 32218 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: CANDACE LEWIS

01/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: LAY () Delete
Name: MCCRAY, PATREACE O MS
Address: 3566 ROGERO ROAD
City-St-Zip: JACKSONVILLE, FL 32277 US

Title: LAY () Delete
Name: WATKINS, EDWARD O MR
Address: 1552 SHEARWATER DRIVE
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: VT () Delete
Name: VIRGIL, TERRI O MS
Address: 11555 BIRCH FOREST CIR W
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: MIN () Delete
Name: HOGANS, LAMONT O MR
Address: 11954 KINGFISHER LANE
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: MIN () Delete
Name: DAVIS, JEFF O MR
Address: 7625 QUINTINA DR
City-St-Zip: JACKSONVILLE, FL 32277 US

Title: FIN () Delete
Name: WILLIAMS, VERNON O MR
Address: 4375 CONFEDERATE POINT RD APT 22 D
City-St-Zip: JACKSONVILLE, FL 32210 US

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
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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 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: VERNON WILLIAMS

FIN

01/13/2009

Electronic Signature of Signing Officer or Director

Date