## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000004722

Entity Name: NEW LIFE REFUGE, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3360 DAVIE BLVD SUITE B

FORT LAUDERDALE, FL 33312

Current Mailing Address: New Mailing Address:

19 N.W. 45TH AVENUE 19 NW 45TH AVE 107 105

DEERFIELD BEACH, FL 33442 DEERFIELD BEACH, FL 33442

FEI Number: 65-0940671 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

WRIGHT, LEANETTA S PD

19 NORTH WEST 45TH AVENUE

# 107

DEERFIELD BEACH, FL 33442 US

WRIGHT, LEANETTA S PD

19 NORTH WEST 45TH AVENUE

# 105

DEERFIELD BEACH, FL 33442 US

DEERFIELD BEACH, FL 33442 US

SEEK 1228 BE 1811, 12 88 112 88

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: 04/30/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:PD () DeleteTitle:PD (X) Change () AdditionName:WRIGHT, LEANETTAName:WRIGHT, LEANETTAAddress:19 NORTH WEST 45TH AVE.Address:19 NORTH WEST 45TH AVE.#105

Address: 19 NORTH WEST 45TH AVE. Address: 19 NORTH WEST 45TH AVE.#105
City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: DEERFIELD BEACH, FL 33442

Title: VPD ( ) Delete Title: VPD (X) Change ( ) Addition Name: WRIGHT, OTHNNIEL Name: WRIGHT, OTHNNIEL

Address: 19 NORTH WEST 45TH AVENUE #107 Address: 19 NORTH WEST 45TH AVENUE #105
City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: DEERFIELD BEACH, FL 33442

Title: STD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MASON, EVELYN
 Name:

 Address:
 609 4TH STREET NORTH
 Address:

 City-St-Zip:
 BIRMINGHAM, AL 35204
 City-St-Zip:

Name:ASHLEY, DEBORAHName:ASHLEY, DEBORAHAddress:19 NW 45TH AVE. #107Address:6414 DEMARUS AVENUE NWCity-St-Zip:DEERFIELD BEACH, FL 33442City-St-Zip:HUNTSVILLE, AL 35806

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: LEANETTA WRIGHT PD 04/30/2008