

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000005738

**FILED**  
**Jan 11, 2021**  
**Secretary of State**  
**9917817006CC**

**Entity Name:** NEW LIFE COMMUNITY CHURCH OF PALM BEACH COUNTY, INC.

**Current Principal Place of Business:**

4122 PGA BLVD.  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

4122 PGA BLVD.  
PALM BEACH GARDENS, FL 33410 US

**FEI Number: 35-2255674**

**Certificate of Status Desired: No**

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

DAMON, SCRIVNER  
8531 BEACONHILL RD.  
PALM BEACH GARDENS, FL 33410 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

**Officer/Director Detail :**

Title P  
Name DAMON, SCRIVNER  
Address 8531 BEACONHILL RD.  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title S  
Name BOTHE, VICTORIA I  
Address 13046 52ND CT N  
City-State-Zip: ROYAL PALM BEACH FL 33411

Title T  
Name SOLOMON, SHIRLEY  
Address 2928 CARVELLE DR.  
City-State-Zip: RIVIERA BEACH FL 33404

*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: SCRIVNER DAMON**

**PRESIDENT**

**01/11/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date