

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000006040

**FILED**  
**Apr 16, 2013**  
**Secretary of State**  
**CC0922155471**

**Entity Name:** NEW CHURCH OF FAITH ACADEMY, INC.

**Current Principal Place of Business:**

5000 SILVER STAR ROAD  
ORLANDO, FL 32808

**Current Mailing Address:**

5000 SILVER STAR ROAD  
ORLANDO, FL 32808

**FEI Number:** 27-0374913

**Certificate of Status Desired:** No

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

BEACHAM, ALONZO R  
7144 COUNTRY RUN PARKWAY  
ORLANDO, FL 32818 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 PD  
Name BEACHAM, PATRICIA B  
Address 4458 BEGONIA ST  
City-State-Zip: WINDERMERE FL 34786

Title VPD  
Name RUSS, CHARLIE J  
Address 8227 WINDSOR RIDGE  
City-State-Zip: ORLANDO FL 32835

Title TD  
Name MARTIN, WENDELL  
Address 2510 BRINSMALD CT  
City-State-Zip: ORLANDO FL 32712

Title SD  
Name BEACHAM, MEKA  
Address 7144 COUNTRY RUN PARKWAY  
City-State-Zip: ORLANDO FL 32818

Title D  
Name LEMMON, DOROTHY E  
Address 312 BURLEIGH ST  
City-State-Zip: ORLANDO FL 32824

Title D  
Name BEACHAM, LASHAWN T  
Address 4170 ROSE PETAL LN  
City-State-Zip: ORLANDO FL 32808

*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:** LASHAWN T BEACHAM

**PRESIDENT**

**04/16/2013**

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

\_\_\_\_\_  
Date