

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000009591

Entity Name: NEW LIFE RECOVERY CENTRE, INC.

Current Principal Place of Business:

4163 N US HIGHWAY 1
FORT PIERCE, FL 34946

Current Mailing Address:

4163 N US HIGHWAY 1
FORT PIERCE, FL 34946

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASTILLO, LUIS MR.
4163 N US HIGHWAY 1
FORT PIERCE, FL 34946 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 CASTILLO, LUIS MR.
Address 4163 N US HIGHWAY 1
City-State-Zip: FORT PIERCE FL 34946

Title VP
Name CASTILLO, LUIS
Address 4163 N US HIGHWAY 1
City-State-Zip: FORT PIERCE FL 34946

Title SEC
Name CASTILLO, LUIS
Address 4163 N US HIGHWAY 1
City-State-Zip: FORT PIERCE FL 34946

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: LUIS CASTILLO

PRESIDENT

02/05/2021

Electronic Signature of Signing Officer/Director Detail

Date