


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2005 08:00 AM
Secretary of State

DOCUMENT # 828890 1. Entity Name YOUNG LIFE, INC.	
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Principal Place of Business 420 N. CASCADE COLORADO SPRINGS, CO 80903 US	Mailing Address P.O. BOX 520 COLORADO SPRINGS, CO 80901 US
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DO NOT WRITE IN THIS SPACE



03312005 No Chg-NP CR2E037 (10/03)

4. FEI Number 84-0385934	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
 2731 EXECUTIVE PARK DRIVE
 SUITE 4
 WESTON, FL 33331

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARRISON, WILLIAM 1410 BANKONE TOWER, 500 THROCKNORTON ST FORT WORTH, TX 76102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVAS ALBERTI, KERRY 420 N CASCADE COLORADO SPRINGS, CO 80903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EATON, CAROL 1522 E VICTORY ST, #5 PHOENIX, AZ 85040
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO RYDBERG, DENNIS I. 420 N. CASCADE COLORADO SPRINGS, CO 80903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BRIGGS, DAVID 420 N CASCADE COLORADO SPRINGS, CO 80903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ANDERSON, LARRY 415 W FOOTHILL BLVD CLAREMONT, CA 91711

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100000288340
04/05/05-80006-001 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Bryan Klotz Bryan Klotz, Asst Treasurer 3/31/05 719-381-1977

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #