

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004074

FILED
Apr 25, 2005
Secretary of State

Entity Name: LIFE TRANSFORMING MINISTRIES, INC.

Current Principal Place of Business:

1400 TARPON CENTER DR.
#206
VENICE, FL 34285

New Principal Place of Business:

1642 WAXWING CT.
VENICE, FL 34293

Current Mailing Address:

1400 TARPON CENTER DR.
#206
VENICE, FL 34285

New Mailing Address:

1642 WAXWING CT.
VENICE, FL 34293

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

Name and Address of Current Registered Agent:

REITER, PATRICIA A REV.
1400 TARPON CENTER DR.
#206
VENICE, FL 34285 US

Name and Address of New Registered Agent:

REITER, PATRICIA A REV.
1642 WAXWING CT.
VENICE, FL 34293 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: _____

04/25/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: REITER, PATRICIA A REV.
Address: 1400 TARPON CENTER DR. #206
City-St-Zip: VENICE, FL 34285

Title: STD () Delete
Name: STANDIFER, SHIRLEY J REV.
Address: 1970 N. OLD RT. 47
City-St-Zip: MONTICELLO, IL 61856

Title: D () Delete
Name: REITER, ROBIN REV.
Address: 1722 MALABAR LAKES DRIVE N.E.
City-St-Zip: PALM BAY, FL 32905

Title: D () Delete
Name: SIEBERS, BRIAN
Address: 4100 POLLACK AVE.
City-St-Zip: EVANSVILLE, IN 47714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: REITER, PATRICIA A REV.
Address: 1642 WAXWING CT.
City-St-Zip: VENICE, FL 34293

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: REITER, ROBIN REV.
Address: 3775 7TH LANE
City-St-Zip: VERO BEACH, FL 32968

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: REV. PATRICIA A. REITER

PD

04/25/2005

Electronic Signature of Signing Officer or Director

Date