

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001806

FILED
Mar 17, 2009
Secretary of State

Entity Name: FAITH LIFE INTERNATIONAL CHURCH INC

Current Principal Place of Business:

405 RIDGEWAY BLVD.
DELAND, FL 32724

New Principal Place of Business:

2407 E GRAVES AVE
ORANGE CITY, FL 32763

Current Mailing Address:

P.O. BOX 4487
DELAND, FL 32721 US

New Mailing Address:

2407 E GRAVES AVE
ORANGE CITY, FL 32763

FEI Number: 06-1741092

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKESEY, JAY
405 RIDGEWAY BLVD.
DELAND, FL 32724 US

Name and Address of New Registered Agent:

MCKESEY, JAY
2407 E GRAVES AVE
ORANGE CITY, FL 32763 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:

03/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOLMES, RONALD
Address: 405 RIDGEWAY BLVD.
City-St-Zip: DELAND, FL 32724

Title: VPD () Delete
Name: HOLMES, GINA
Address: 405 RIDGEWAY BLVD.
City-St-Zip: DELAND, FL 32724

Title: TD () Delete
Name: TAYLOR, JENNIFER M
Address: 2038 CLAPPER TRAIL
City-St-Zip: APOPKA, FL 32703

Title: SD () Delete
Name: ROBINSON, SABINE
Address: 907 CASCADE FALLS LANE
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: HEDGEPEETH, DWAYNE
Address: 2757 ORPHA LANE
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JENNIFER M TAYLOR

TD

03/17/2009

Electronic Signature of Signing Officer or Director

Date