## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000006892

FILED Sep 03, 2007 Secretary of State

Entity Name: LIFE CHANGERS CHRISTIAN FELLOWSHIP, INCORPORATED

**Current Principal Place of Business: New Principal Place of Business:** 7052 103RD STREET #307 7052 103RD STREET #307 JACKSONVILLE, FL JACKSONVILLE, FL 32210 **Current Mailing Address: New Mailing Address:** 7052 103RD STREET #307 7052 103RD STREET #307 JACKSONVILLE, FL JACKSONVILLE, FL 32210 FEI Number: 20-4528798 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILLIAMS, MICHAEL L 9338 LOCKHEED LANE US JACKSONVILLE, FL 32221 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete () Change () Addition WILLIAMS, MICHAEL L Name: Name: Address: 9338 LOCKHEED LANE Address: City-St-Zip: JACKSONVILLE, FL 32221 City-St-Zip: Title: ( ) Delete Title: () Change () Addition COOPER, JIMMY Name: Name: Address: 691 ROGER SHERMAN STREET Address: City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition COVINGTON, ABIGAIL Name: TAYLOR, LATRICA Name: 6756 103RD STREET Address: Address: 6848 ALCONA CT City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32210 JACKSONVILLE, FL 32244 Title: () Delete Title: () Change () Addition Name: HORNE, BRIDGETT Name: 7260 LONGHORN CIRCLE SOUTH Address: Address: City-St-Zip: JACKSONVILLE, FL 32244 City-St-Zip: Title: Title: () Delete ( ) Change (X) Addition JAMES, STEVEN L Name: Name: 3174 STONEBRIER RIDGE DRIVE Address: Address: ORANGE PARK, FL 32065 City-St-Zip: 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: BRIDGETT L HORNE T 09/03/2007