

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14840

FILED
Jan 11, 2010
Secretary of State

Entity Name: JOSHUA HOUSE LIFE CENTERS, INC.

Current Principal Place of Business:

111 HILL CIR
LEESBURG, FL 34788 US

New Principal Place of Business:

Current Mailing Address:

JHLC
PO BOX 1150
HILLIARD, OH 43026 US

New Mailing Address:

JHLC
PO BOX 494400
PORT CHARLOTTE, FL 33952 US

FEI Number: 59-2721255

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JORDAN, DONNA S
1078 ORTON ST
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

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:

Title: PD
Name: MCCANN, JAMES
Address: 111 HILL CIR
City-St-Zip: LEESBURG, FL 34788

Title: VD
Name: MCCANN, SANDRA
Address: 111 HILL CIR
City-St-Zip: LEESBURG, FL 34788

Title: SD
Name: LAMB, DONALD
Address: 508 R-HESS ROAD
City-St-Zip: ELIZABETHTOWN, PA 17022

Title: D
Name: LAMB, DOUG
Address: 6140 POPLAR PATH
City-St-Zip: ELIZABETHTOWN, PA 17022

Title: D
Name: ANDERSON, DUANE
Address: 8001 CHURCH POND RD
City-St-Zip: FREDERICKSBURG, VA 22408

Title: TD
Name: HALL, TONY
Address: 10940 STONEBROOK DR
City-St-Zip: MANASSAS, VA 20112

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: SANDRA J. MCCANN

VD

01/11/2010

Electronic Signature of Signing Officer or Director

Date