2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002514

FILED Feb 18, 2007 Secretary of State

Entity Name: THE LIGHT OF THE WORLD CHARITIES, INC.

Current Principal Place of Business: New Principal Place of Business: 3545 SW CORPORATE PKWY PALM CITY, FL 34991 PALM CITY, FL 34991 **Current Mailing Address: New Mailing Address:** PO BOX 273 PO BOX 273 PALM CITY, FL 34991 PALM CITY, FL 34990 FEI Number: 65-0920003 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BANKS, THERESA 5272 SW LANDING CREEK DRIVE PALM CITY, FL 34990 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: (X) Change () Addition () Delete ULLMANN, CHRISTOPHER CHABOT, RICHARD DR. Name: Name: 4860 SW HAMMOCK CREEK DRIVE Address: 13430 HARBOUR RIDGE BLVD. Address: City-St-Zip: PALM CITY, FL 34990 City-St-Zip: PALM CITY, FL 34990 Title: PD () Delete Title: () Change () Addition BANKS, THERESA Name: Name: Address: 5272 S.W. LANDING CREEK DR. Address: City-St-Zip: PALM CITY, FL 34990 City-St-Zip: Title: () Delete Title: () Change () Addition LAURIE, SCHWAB Name: Name: 1028 S INDIAN RIVER DRIVE Address: Address: City-St-Zip: FORT PIERCE, FL 34982 City-St-Zip: Title: TD () Delete Title: () Change () Addition Name: KELLY, RICHARD Name: 1491 WILD OLIVE CT Address: Address: City-St-Zip: PALM CITY, FL 34990 City-St-Zip: Title: Title: () Delete () Change () Addition INGRAM, KEITH Name: Name: 101 N SEWALLS POINT RD Address: Address: City-St-Zip: STUART, FL 34996 City-St-Zip: Title: () Delete Title: (X) Change () Addition SCHOPPE, PAUL DR. BERCH, SANDY Name: Name: Address: 9397 SE SHARON STREET Address: 8 PALM ROAD HOBE SOUND, FL 33455 SEWALLS POINT, FL 34996 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: RICHARD KELLY TD 02/18/2007