


**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P93000034018 1. Entity Name LIFELIGHT PRODUCTIONS, INC.		
Principal Place of Business 555 NW 4TH AVE #114 BOCA RATON, FL 33432 US		Mailing Address 555 NW 4TH AVE #114 BOCA RATON, FL 33432 US
2. Principal Place of Business 2680 SW Bear Paw Tr		3. Mailing Address 2680 SW Bear Paw Trail
City & State PALM CITY, FL		City & State PALM CITY, FL
Zip 34990		Zip 34990
Country USA		Country USA
4. FEI Number 65-0408468		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent BANDY, GREGORY A. 655 NW 4TH AVE #114 BOCA RATON, FL 33432		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent's signature required when re-stating)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BANDY, HALLIE E 655 NW 4TH AVE #114 BOCA RATON, FL 33432	VP BANDY, HALLIE E <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2680 SW BEAR PAW TRAIL PALM CITY, FL 34990
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BANDY, GREGORY A 655 NW 4TH AVE #114 BOCA RATON, FL 33432	P BANDY, GREGORY A <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2680 BEAR PAW TRAIL PALM CITY, FL 34990
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Gregory A. Bandy</u> Gregory A. Bandy, Pres <u>3-31-03</u> (561) 706-9160 <small>SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		

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CHECK HERE IF MAKING CHANGES

CR2E034 (10/02)