

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000005501

**Entity Name:** LIFE IN THE SON MINISTRIES, INC.

**Current Principal Place of Business:**

18 W. BASS STREET  
KISSIMMEE, FL 34741

**Current Mailing Address:**

18 W. BASS STREET  
KISSIMMEE, FL 34741

**FEI Number: 27-0301100**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

DEMOND, JANICE E  
18 W. BASS STREET  
KISSIMMEE, FL 34741 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title BOARD MEMBER  
Name BENNETT, WILLIS  
Address 525 S.CONWAY RD. UNIT 137  
City-State-Zip: ORLANDO FL 32807

Title CHAIRMAN  
Name ALVELO, RICHARD  
Address 12308 HOLLY JANE CT.  
City-State-Zip: ORLANDO FL 32824

Title BOARD MEMBER  
Name OWENS, CHARLES  
Address 1509 SUNSET POINT  
City-State-Zip: KISSIMMEE FL 34744

Title BOARD MEMBER  
Name DEMOND, JAN  
Address 18 W. BASS ST.  
City-State-Zip: KISSIMMEE FL 34741

Title DIRECTOR  
Name JORDAN, LEONARD M.  
Address 18 W. BASS STREET  
City-State-Zip: KISSIMMEE FL 34741

Title TREASURER  
Name PURDUM, BEN  
Address 2067 CROSSTON CIRCLE  
City-State-Zip: ORLANDO FL 32824

*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: JANICE DEMOND**

**BOARD  
MEMBER, FOUNDER**

**02/05/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date