

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000002984

**FILED**  
**Apr 22, 2018**  
**Secretary of State**  
**CC6610476301**

**Entity Name:** LIFE SOURCE FAITH-BASED MINISTRY, INC.

**Current Principal Place of Business:**

422 NORTH SAINT CLAIR STREET  
STARKE, FL 32091

**Current Mailing Address:**

P.O. BOX 1255  
STARKE, FL 32091

**FEI Number: 80-0603765**

**Certificate of Status Desired: No**

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

TRUE VINE OUTREACH MINISTRIES, INC.  
422 NORTH SAINT CLAIR STREET  
STARKE, FL 32091 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 ELD.  
Name CHANDLER, ROSS  
Address P.O. BOX 333  
City-State-Zip: STARKE FL 32091

Title A  
Name CRUGER, FELICIA S  
Address 1371 SE 24TH PLACE  
City-State-Zip: GAINESVILLE FL 32641

Title A  
Name DAVIS, DAISY  
Address 403 E. MARKET RD.  
City-State-Zip: STARKE FL 32091

*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: ROSS CHANDLER**

**SR. PASTOR**

**04/22/2018**

Electronic Signature of Signing Officer/Director Detail

Date