

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12299

**FILED**  
**Jan 28, 2013**  
**Secretary of State**  
**CC3404598044**

**Entity Name:** LIFEPOINT FAMILY CHURCH INC.

**Current Principal Place of Business:**

6430 SOUTH LEWDINGAR DRIVE  
HOMOSASSA, FL 34446

**Current Mailing Address:**

6430 SOUTH LEWDINGAR DRIVE  
HOMOSASSA, FL 34446

**FEI Number: 59-2546870**

**Certificate of Status Desired: No**

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

DERESPIRIS, DOUG REV  
36 REDBAY CT W  
HOMOSASSA, FL 34446 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            PRES  
Name            DERESPIRIS, DOUG MREV  
Address        36 REDBAY CT W  
City-State-Zip: HOMOSASSA FL 34446

Title            VP  
Name            BODENSTEIN, BRADLEY J  
Address        24 HEUCHERA CT E  
City-State-Zip: HOMOSASSA FL 34446

Title            SECR  
Name            TROTTER, DEBORAH  
Address        6750 W. APPIAN ST  
City-State-Zip: HOMOSASSA FL 34446

Title            TREA  
Name            DERESPIRIS, ROBIN L  
Address        36 REDBAY CT W  
City-State-Zip: HOMOSASSA FL 34446

*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: DOUGLAS M. DERESPIRIS**

**PRESIDENT**

**01/28/2013**

Electronic Signature of Signing Officer/Director Detail

Date