

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2008 8:00 am
Secretary of State

03-27-2008 90023 035 ****70.00

DOCUMENT # 703949	
1. Entity Name LIFE LINE CENTER (CHRIST IN THE HOME, INC.)	

Principal Place of Business 618 EAGLE RUN LAKELAND FL 33809 US	Mailing Address P O BOX 1766 WINTER HAVEN FL 33882 US
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. 18012 Tropical Cove Dr.	3. Mailing Address Suite, Apt. #, etc. P.O. Box 48604
City & State Tampa, Florida	City & State Tampa, Florida
Zip 33647	Country USA

1st MOORE CR2E037 (10/07)

4. FEI Number 65-0089457	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent GALLOWAY, MILDRED L 618 EAGLE RUN LAKELAND FL 33809	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 18012 Tropical Cove Drive City Tampa FL Zip Code 33647	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GALLOWAY, MILDRED L 618 EAGLE RUN LAKELAND FL 33809 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GALLOWAY, Mildred L. 18012 Tropical Cove Drive Tampa, FL 33647 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JONES, LAURA L 618 EAGLE RUN LAKELAND FL 33809 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Jones, Laura L 18012 Tropical Cove Drive Tampa, FL 33647 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GOFF, BARBARA A 618 EAGLE RUN LAKELAND FL 33809 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Goff, Barbara A. 18012 Tropical Cove Drive Tampa, FL 33647 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 617, 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: Mildred L. Galloway March 16, 2008 (863) 513-8387

ATTACHMENT

40052201

703949

First Name	Mildred	Middle Initial	L	PRINT MOVE DATE BELOW			
Last Name	GALLOWAY			M	M	D	Y
				4	1	08	
PRINT OLD ADDRESS BELOW							
Old Address	618 Eagle Run			Apt/Ste			
City	LAKELAND			State	FL	ZIP	33809
PRINT NEW ADDRESS AND E-MAIL BELOW							
New Address	18012 Tropical Cove Drive			Apt/Ste			
City	TAMPA			State	FL	ZIP	33647
E-mail Address	LifelineCenter@Verizon.net						

Note: By providing your e-mail you are agreeing to receive marketing e-mails from the catalogs you selected above. See details on the back.

First Name	LIFELINE CENTER	Middle Initial		PRINT MOVE DATE BELOW			
Last Name	(Christ in The Home)			M	M	D	Y
				4	1	08	
PRINT OLD ADDRESS BELOW							
Old Address	PO BOX 481766			Apt/Ste			
City	WINTER HAVEN			State	FL	ZIP	33882
PRINT NEW ADDRESS AND E-MAIL BELOW							
New Address	PO BOX 48604			Apt/Ste			
City	TAMPA			State	FL	ZIP	33646
E-mail Address	LifelineCenter@Verizon.net						

Note: By providing your e-mail you are agreeing to receive marketing e-mails from the catalogs you selected above. See details on the back.