## FILE NOW: FILING FEE IS \$61.25

**FILED** NONPROFIT FLORIDA DEPARTMENT OF STATE Apr 27 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # THE LIFE CENTER CHURCH, INC. Principal Place of Business Mailing Address 63 E. KENNEDY BLVD 63 E. KENNEDY BLVD 3. Date Incorporated or Qualified **EATONVILLE FL 32751 EATONVILLE FL 32751** 02/07/1976 4. FEI Number Applied For 59-1832203 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired Fee Required 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 22 City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes No 23 28 Ζip Country Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name DANIELS, LETTIE BELL 82 Street Address (P.O. Box Number is Not Acceptable) 849 S WYMORE RD 41-B 83 ALTAMONTE SPRINGS FL 32714 Zip Code 84 City R5 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition Change **DELETE** 1.1 TITLE TITLE ŜŢ 1.2 NAME HENSON, BARRY G NAME 505 N. TAMPA AVE 1.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Orlando fl 1.4 CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE 2.2 NAME KIMBLE, RONALD(PASTOR) NAME 316 MACARTHUR PLACE 2.3 STREET ADDRESS STREET ADDRESS MAITLAND FL 2.4 CHY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME TAYLOR, VINCE NAME 225 SOLDIER CREEK PLACE 3.3 STREET ADDRESS STREET ADDRESS LONGWOOD FL 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME SHAW, JOHN NAME 5919 WHITE EGRET LANE 4.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change DELETE TITLE 5.1 TITLE 5.2 NAME NAME STYLES, STAILEY 718 WILWOOD DRIVE **5.3 STREET ADDRESS** STREET ADDRESS WINTER SPRINGS FL 5.4 CITY-ST-ZIP CATY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE WILLIAMS, LORENZO 6.2 NAME NAME STREET ADDRESS 4702 SPANIEL ST **6.3 STREET ADDRESS** ORLANDO FL 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 in anged, or on an attachment with an address.

April 7, 1998

(407) 628-3229