

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 739198

FILED
Jan 03, 2003
Secretary of State

Entity Name: ETERNAL LIFE MINISTRIES, INC.

Current Principal Place of Business:

10818 CHERITH LANE
CLERMONT, FL 34711 US

New Principal Place of Business:

Current Mailing Address:

10818 CHERITH LANE
CLERMONT, FL 34711 US

New Mailing Address:

FEI Number: 59-1759931

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOODALL, DOROTHY J
10818 CHERITH LANE
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WOODALL, OSCAR M.,
Address: 10818 CHERITH LANE
City-St-Zip: CLERMONT, FL

Title: D () Delete
Name: WOODALL, JOHN M.,
Address: 47088 GLENAIRE CT
City-St-Zip: STERLING, VA 20165

Title: D () Delete
Name: WOODALL, DOROTHY J,
Address: 10818 CHERITH LANE
City-St-Zip: CHERMONT, FL

Title: D () Delete
Name: WERNER, LINDA,
Address: 10137 JACARANDA
City-St-Zip: CLERMONT, FL

Title: D () Delete
Name: WOODALL, LISA
Address: 7646 ASTORIA PLACE
City-St-Zip: RALEIGH, NC 27612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: OSCAR M WOODALL

PD

01/03/2003

Electronic Signature of Signing Officer or Director

Date