

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755843

FILED  
Jan 06, 2010  
Secretary of State

**Entity Name:** LIFE MINISTRIES, INC.

**Current Principal Place of Business:**

1183 CHESTNUT ST  
CLERMONT, FL 347121005

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 121005  
CLERMONT, FL 347121005

**New Mailing Address:**

**FEI Number:** 59-2166991

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SMITH, JEANNINE  
1183 CHESNUT STREET  
CLERMONT, FL 34712 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: TD  
Name: SMITH, JEANNINE  
Address: 1183 CHESTNUT ST.  
City-St-Zip: CLERMONT, FL 347121005

Title: PD  
Name: SMITH, IW  
Address: 1183 CHESTNUT ST  
City-St-Zip: CLERMONT, FL 347121005

Title: SD  
Name: DICE, COLLENE  
Address: 3239 NW 44TH PL  
City-St-Zip: GAINESVILLE, FL 32605

Title: VD  
Name: DICE, W. CLORE  
Address: 3239 NW 44TH PLACE  
City-St-Zip: GAINESVILLE, FL 32605

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:** IW SMITH

PD

01/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date