2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758585

FILED May 03, 2005 Secretary of State

Entity Name: LIGHT OF CHRIST COMMUNITY CHURCH, INC.

	Principal Place of Business:	New Principal Place of Business:
	IIT RIDGE DRIVE JAH, OK 74464	
Current l	Mailing Address:	New Mailing Address:
	IIT RIDGE DRIVE JAH, OK 74464	
n accorda	r: 73-1135021 FEI Number Applied For (nce with s. 607.193(2)(b), F.S., the corporation d Address of Current Registered Age	did not receive the prior notice.
vanie an	a Address of Garrent Registered Age	mt. Hame and Address of New Registered Agent.
124 BOSF	S, EMMA DOROTHEA PHORUS FL 33606 US	
	e named entity submits this statement fo te of Florida.	r the purpose of changing its registered office or registered agent, or both,
SIGNATU	JRE:	
	Electronic Signature of Registere	ed Agent Date
	AND DIDECTORS:	
OFFICER	RS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
itle: lame: .ddress:	PD () Delete PARRISH-HARRA, CAROL E 101 SUMMIT RIDGE DRIVE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: () Change () Addition Name: Address: City-St-Zip:
Title: lame: Address: City-St-Zip: Title: lame: Address:	PD () Delete PARRISH-HARRA, CAROL E 101 SUMMIT RIDGE DRIVE	Title: () Change () Addition Name: Address:
DFFICER Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Oldy-St-Zip: City-St-Zip:	PD () Delete PARRISH-HARRA, CAROL E 101 SUMMIT RIDGE DRIVE TAHLEQUAH, OK TD () Delete HARRA, CHARLES C, 101 SUMMIT RIDGE	Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
Title: lame: lame: city-St-Zip: Title: lame: city-St-Zip: Title: lame: city-St-Zip: lame: citdress:	PD () Delete PARRISH-HARRA, CAROL E 101 SUMMIT RIDGE DRIVE TAHLEQUAH, OK TD () Delete HARRA, CHARLES C, 101 SUMMIT RIDGE TAHLEQUAH, OK DS () Delete PERRY, H. J. 702 SUMMT RIDGE CT TAHLEQUAH, OK D () Delete SIMOTA, THOMAS 2335 STEWART AVE, APT 316	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: CAROL PARRISH-HARRA PD 05/03/2005