


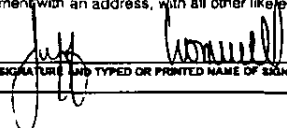


FILED  
Feb 28, 2007 8:00 am  
Secretary of State

02-12-2007 90105 039 \*\*\*\*61.25

**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

<b>DOCUMENT # 769490</b>																																																	
1. Entity Name RADIANT LIFE ASSEMBLY OF GOD OF ORLANDO, FLORIDA, INC.																																																	
Principal Place of Business 8151 CLARCONA - OCOEE RD ORLANDO, FL 32818 US	Mailing Address 8151 CLARCONA OCOEE ROAD ORLANDO, FL 32818 US	<b>66003302</b>   01192007 No Chg-NP CR2E037 (4/06) 4. FEI Number 59-2358786 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required Applied For Not Applicable																																															
<b>DO NOT WRITE IN THIS SPACE</b>																																																	
6. Name and Address of Current Registered Agent  REV. JEFF CROMWELL 8111 CLARCONA OCOEE RD ORLANDO, FL 32818																																																	
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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's signature required when reappointing) 1-19-07 DATE																																																	
Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																
10. OFFICERS AND DIRECTORS																																																	
<table border="1"><tr><td>TITLE</td><td>P</td></tr><tr><td>NAME</td><td>CROMWELL, JEFF REV</td></tr><tr><td>STREET ADDRESS</td><td>8111 CLARCONA OCOEE RD</td></tr><tr><td>CITY-ST-ZIP</td><td>ORLANDO, FL 32818</td></tr><tr><td>TITLE</td><td>TS</td></tr><tr><td>NAME</td><td>LONG, WEAVER</td></tr><tr><td>STREET ADDRESS</td><td>1270 ORANGE ST</td></tr><tr><td>CITY-ST-ZIP</td><td>APOPKA, FL</td></tr><tr><td>TITLE</td><td>D</td></tr><tr><td>NAME</td><td>RAMLACKHANS, TONY</td></tr><tr><td>STREET ADDRESS</td><td>400 REGAL DOWNS CIRCLE</td></tr><tr><td>CITY-ST-ZIP</td><td>WINTER GARDEN, FL</td></tr><tr><td>TITLE</td><td>D</td></tr><tr><td>NAME</td><td>KRYWICK, SCOTT</td></tr><tr><td>STREET ADDRESS</td><td>232 VALLEY EDGE DR</td></tr><tr><td>CITY-ST-ZIP</td><td>CLERMONT, FL 34711</td></tr><tr><td>TITLE</td><td>D</td></tr><tr><td>NAME</td><td>JOHNSON, HERBERT</td></tr><tr><td>STREET ADDRESS</td><td>6313 GAMBLE DRIVE</td></tr><tr><td>CITY-ST-ZIP</td><td>ORLANDO, FL 32818</td></tr><tr><td>TITLE</td><td></td></tr><tr><td>NAME</td><td></td></tr><tr><td>STREET ADDRESS</td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td></tr></table>		TITLE	P	NAME	CROMWELL, JEFF REV	STREET ADDRESS	8111 CLARCONA OCOEE RD	CITY-ST-ZIP	ORLANDO, FL 32818	TITLE	TS	NAME	LONG, WEAVER	STREET ADDRESS	1270 ORANGE ST	CITY-ST-ZIP	APOPKA, FL	TITLE	D	NAME	RAMLACKHANS, TONY	STREET ADDRESS	400 REGAL DOWNS CIRCLE	CITY-ST-ZIP	WINTER GARDEN, FL	TITLE	D	NAME	KRYWICK, SCOTT	STREET ADDRESS	232 VALLEY EDGE DR	CITY-ST-ZIP	CLERMONT, FL 34711	TITLE	D	NAME	JOHNSON, HERBERT	STREET ADDRESS	6313 GAMBLE DRIVE	CITY-ST-ZIP	ORLANDO, FL 32818	TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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:  1-19-07 Date Daytime Phone #																																																	