

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 17, 2008
Secretary of State**

DOCUMENT# F07000001022

Entity Name: LIFE COVENANT CHURCH, INC.

Current Principal Place of Business:

4600 EAST 2ND STREET
EDMOND, OK 73034

New Principal Place of Business:

Current Mailing Address:

4600 EAST 2ND STREET
EDMOND, OK 73034

New Mailing Address:

FEI Number: 73-1486708 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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: GROESCHEL, CRAIG
Address: 4600 EAST 2ND STREET
City-St-Zip: EDMOND, OK 73034

Title: VD () Delete
Name: HURLEY, JERRY
Address: 4600 EAST 2ND STREET
City-St-Zip: EDMOND, OK 73034

Title: VSD () Delete
Name: PENRY, KEVIN
Address: 4600 EAST 2ND STREET
City-St-Zip: EDMOND, OK 73034

Title: T () Delete
Name: LINCH, CATHI
Address: 4600 EAST 2ND STREET
City-St-Zip: EDMOND, OK 73034

Title: VD () Delete
Name: GRUENEWALD, ROBERT
Address: 4600 EAST 2ND STREET
City-St-Zip: EDMOND, OK 73034

Title: VD () Delete
Name: ROBERTS, SAM
Address: 4600 EAST 2ND STREET
City-St-Zip: EDMOND, OK 73034

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:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CATHI M LINCH

Electronic Signature of Signing Officer or Director

T

01/17/2008

Date