

**2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 24, 2011  
Secretary of State**

DOCUMENT# F07000002136

Entity Name: FAMILY LIFE BROADCASTING, INC.

**Current Principal Place of Business:**

7355 N. ORACLE ROAD  
TUCSON, AZ 85740

**New Principal Place of Business:**

**Current Mailing Address:**

4850 WRIGHT RD  
STE 168  
STAFFORD, TX 77477

**New Mailing Address:**

FEI Number: 86-0465466      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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  
Name: CARLSON, RANDY L  
Address: 7355 N ORACLE ROAD  
City-St-Zip: TUCSON, AZ 85740

Title: V  
Name: WILLIAMS, ALONZO  
Address: 7355 N ORACLE ROAD  
City-St-Zip: TUCSON, AZ 85740

Title: S  
Name: WILSON, DENNIS  
Address: 7355 N ORACLE ROAD  
City-St-Zip: TUCSON, AZ 85740

Title: T  
Name: GOODALL, DOUGLAS  
Address: 7355 N ORACLE ROAD  
City-St-Zip: TUCSON, AZ 85740

Title: CHRM  
Name: BOLTHOUSE, WARREN J  
Address: 7355 N ORACLE ROAD  
City-St-Zip: TUCSON, AZ 85740

Title: D  
Name: LARRY, CARLSON J  
Address: 3780 PERRINE ROAD  
City-St-Zip: RIVES JUNCTION, MI 49227

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: DOUGLAS GOODALL

T

01/24/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date