

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000112742

FILED
May 01, 2012
Secretary of State

Entity Name: LIVINGPROOFLIFEMINISTRIES, LLC

Current Principal Place of Business:

2174 ORCHARD PARK DR
SPRING HILL, FL 34608 US

New Principal Place of Business:

Current Mailing Address:

2174 ORCHARD PARK DR
SPRING HILL, FL 34608 US

New Mailing Address:

FEI Number: 30-0713985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GUNN, PARRIS
2174 ORCHARD PARK DR
SPRING HILL, FL 34608 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SULLIVAN, JAMES
Address: 9702 UNIVERSAL BLVD 215
City-St-Zip: ORLANDO, FL 32819 US

Title: MGRM
Name: GUNN, LAVERNE
Address: 2174 ORCHARD PARK DR
City-St-Zip: SPRING HILL, FL 34608 US

Title: MGRM
Name: GUNN, PARRIS
Address: 2174 ORCHARD PARK DR
City-St-Zip: SPRING HILL, FL 34608 US

Title: MGRM
Name: GUNN JR, PARRIS
Address: 2003 LAKE ALDEN DR
City-St-Zip: APOPKA, FL 32712 US

Title: MGRM
Name: GUNN, RONOLIA
Address: 2003 LAKE ALDEN DR
City-St-Zip: APOPKA, FL 32712 US

Title: MGRM
Name: JOHNSON, SHIELA
Address: 5008 GANDROSS LANE
City-St-Zip: MT. DORA, FL 32757 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PARRIS GUNNJR

MGRM

05/01/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date