2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 01, 2007 8:00 am Secretary of State DOCUMENT # N00000000446 1. Entity Name 03-01-2007 90154 001 ****61.25 WAY OF LIFE KOREAN PRESBYTERIAN CHURCH, INC. 03-01-2007 90154 002 *****8.75 Principal Place of Business Mailing Address 4691A SW 43RD TERR. 4691A SW 43RD TERR. DAVIE FL 33314 **DAVIE FL 33314** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State 4. FEI Number Applied For City & State 65-0901075 Not Applicable Zip Country Zip Country \$8.75 Additional 5 Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo PARK, JANG SUNG Street Address (P.O. Box Number is Not Acceptable) 4691A SW 43RD TERR. **DAVIE FL 33314** City Zip Code 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 agast. SIGNATURE and title it applicable. FILE NOW: FEE IS \$61.25 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. DILE Delete BHE X Change SU 43rd Terr. PARK, JANG SUNG NAME STREET ADDRESS 4691A SW 43RD TERR. STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP **DAVIE FL 33314** ☐ Change HILE STD ☐ Delete TITLE ☐ Addition NAME PARK, HYE YOUNG NAME STREET ADORESS STREET ADDRESS 4691A SW 43RD TERR. CITY-ST-ZIP CLTY ST-ZIP DAVIE FL 33314 Change 🌠 Delete iiil£-I Addition NAME NAME LIM, HYEON KYUNG STREET ADDRESS STREET ADDRESS 4691A SW 43RD TERR. CITY+S1-ZIP CHY-SI+7IP DAVIE FL 33314 ☐ Delete THLE ☐ Addition ШЩ NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-S1-7IP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TATLE ☐ Delete THE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath, 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.

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