

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000643

FILED
Jan 18, 2006
Secretary of State

Entity Name: BREAD OF LIFE CHURCH INC.

Current Principal Place of Business:

2690 JAEGER DR.
DELRAY BCH, FL 33444

New Principal Place of Business:

624 JAEGER DR.
DELRAY BCH, FL 33444

Current Mailing Address:

624 JAEGER DR
DELRAY BCH, FL 33444

New Mailing Address:

FEI Number: 65-0982133 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLEGHORN, CHARLES R
624 JAEGER DR
DELRAY BCH, FL 33444 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: P () Delete
Name: CLEGHORN, CHARLES R
Address: 624 JAEGER DR.
City-St-Zip: DELRAY BEACH, FL 33444

Title: BT () Delete
Name: CLEGHORN, DENISE
Address: 624 JAEGER DR.
City-St-Zip: DELRAY BEACH, FL 33444

Title: VPT () Delete
Name: CARUSO, TONY
Address: 216 LIVE OAK LANE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: ST () Delete
Name: WORSELEY, DAVID R
Address: 3930 TULIP TREE DR.
City-St-Zip: LANTANA, FL 33462

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES CLEGHORN

PRES

01/18/2006

Electronic Signature of Signing Officer or Director

Date