2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2002 8:00 AM
Secretary of State

DOCUMENT# N00000003589

Entity Name: LIFELINE COMMUNITY CHRISTIAN CENTER, INC.

Current Principal Place of Business:

1008 1/2 DREW STREET
CLEARWATER, FL 33755

New Principal Place of Business:

Current Mailing Address:

1008 1/2 DREW STREET
CLEARWATER, FL 33755

New Mailing Address:

FEI Number: 59-3662202 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPIDEL, GLORIA P
1008 1/2 DREW STREET
CLEARWATER, FL 33755

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: SPIDEL, CHARLES
Address: 1008 1/2 DREW ST
City-St-Zip: CLEARWATER, FL 33755

Title: EDVP ( ) Delete
Name: SPIDEL, GLORIA
Address: 1008 1/2 DREW STREET
City-St-Zip: CLEARWATER, FL 33755

Title: S ( ) Delete
Name: BROKENSHIRE, EDNA
Address: 1008 1/2 DREW STREET
City-St-Zip: CLEARWATER, FL 33755

Title: D ( ) Delete
Name: WILSON, THURMAN
Address: 1008 1/2 DREW STREET
City-St-Zip: CLEARWATER, FL 33755

Title: T ( ) Delete
Name: MAYER, GREG
Address: 1008 1/2 DREW STREET
City-St-Zip: CLEARWATER, FL 33755

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: G. T. MAYER TR 04/18/2002

Electronic Signature of Signing Officer or Director — Date