

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004849

Entity Name: FAMILY LIFE CENTER MINISTRIES, INC.

FILED
Apr 16, 2004
Secretary of State

Current Principal Place of Business:

5046 KEATON CREST DRIVE
ORLANDO, FL 32837

New Principal Place of Business:

Current Mailing Address:

5046 KEATON CREST DRIVE
ORLANDO, FL 32837

New Mailing Address:

FEI Number: 59-3664974

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TANNER, SAM E
5046 KEATON CREST DRIVE
ORLANDO, FL 32837

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: D () Delete
Name: LAWS, PATRICIA
Address: 2374 WHISPERING MAPLE DRIVE
City-St-Zip: ORLANDO, FL 32837

Title: D () Delete
Name: O'DELL, DIANA
Address: 3722 AHOYA LANE
City-St-Zip: ORLANDO, FL 32837

Title: D () Delete
Name: TANNER, SAM
Address: 5046 KEATON CREST DRIVE
City-St-Zip: ORLANDO, FL 32837

Title: D () Delete
Name: WINSOR, GLEN
Address: 8143 GRANADA BLVD
City-St-Zip: ORLANDO, FL 32836

Title: ST () Delete
Name: WHITE, MICHAEL
Address: 1458 WELSON RD.
City-St-Zip: ORLANDO, FL 32837

Title: D (X) Delete
Name: GRECH, JAMES
Address: 13527 TEXAS WOODS CIRCLE
City-St-Zip: ORLANDO, FL 32824

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: THOMAS, JAMES
Address: 12320 ABBERTON COURT
City-St-Zip: ORLANDO, FL 32837

Title: D (X) Change () Addition
Name: MARTIN, GERALD
Address: 2217 CHADBOURN COURT
City-St-Zip: ORLANDO, FL 32837

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D ST (X) Change () Addition
Name: WHITE, MICHAEL
Address: 1458 WELSON RD.
City-St-Zip: ORLANDO, FL 32837

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: MICHAEL WHITE

D ST

04/16/2004

Electronic Signature of Signing Officer or Director

Date