## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000001624

City-St-Zip:

WESTLAND, MI 48185

FILED Jun 30, 2004 Secretary of State

Entity Nai	me: LIFE SAV	'ING MINISTRIES, INC.				
Current Principal Place of Business:				New Principal Place of Business:		
668 BRIDO OCOEE, F	GE CREEK BL' L 34761	√D.				
Current Mailing Address:				New Mailing Address:		
668 BRIDGE CREEK BLVD. OCOEE, FL 34761				P.O. BOX 826 GOTHA, FL 347340826		
FEI Number: 59-3705860 FEI Number Applied For ( )		FEI Number Applied For()	FEI Nun	nber Not Applicable ( )	) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
OCOEE, F	GE CREEK BL' L 34761		purpose o	f changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:					
Electronic Signature of Registered Agent					Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D ( ) MILLER, ROGE 668 BRIDGE C OCOEE, FL 34	REEK BLVD.		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( ) MILLER, YVON 668 BRIDGE C OCOEE, FL 34	REEK BLVD.		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D ( ) MILLER, GENE 1769 CARLSOI			Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: ROGER A. MILLER MR. 06/30/2004