## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000001624

Address:

City-St-Zip:

1769 CARLSON

WESTLAND, MI 48185

FILED May 02, 2005 Secretary of State

Entity Nar	me: LIFE SAVING MINISTRIES, INC.		•	
Current P	rincipal Place of Business:	New Principal Place	of Business:	
668 BRIDO OCOEE, F	GE CREEK BLVD. L 34761			
Current M	lailing Address:	New Mailing Address	New Mailing Address:	
P.O. BOX GOTHA, F	826 L 347340826			
	: 59-3705860 FEI Number Applied For ( ce with s. 607.193(2)(b), F.S., the corporation		Certificate of Status Desired ( )	
	Address of Current Registered Ager		New Registered Agent:	
OCOEE, F	GE CREEK BLVD.	the purpose of changing its registered	l office or registered agent, or both,	
SIGNATUR	RE:			
	Electronic Signature of Registere	d Agent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D ( ) Delete MILLER, ROGER A 668 BRIDGE CREEK BLVD. OCOEE, FL 34761	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete MILLER, YVONNE M 668 BRIDGE CREEK BLVD. OCOEE, FL 34761	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	D () Delete MILLER, GENEVA	Title: Name:	( ) 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.

Address:

City-St-Zip:

SIGNATURE: ROGER A. MILLER 05/02/2005 MR.