2003 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2003
Secretary of State

DOCUMENT# N01000003868

Entity Name: LIFE RENEWAL MINISTRIES, INC.

Current Principal Place of Business:

8535 BAYMEADOWS RD., SUITE 56
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

8535 BAYMEADOWS RD., SUITE 56
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 59-3746887 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VANOVEN, MICHELE
8535 BAYMEADOWS RD., SUITE 56
JACKSONVILLE, FL 32256

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:	VANOVEN, MICHELE	
Address:	2843 SWEETHOLLY DR.	
City-St-Zip:	JACKSONVILLE, FL 32223	
Title:	D	( ) Delete
Name:	THOMPSON, CHRISTINE	
Address:	1961 FORESTER CREEK RD.	
City-St-Zip:	EL CAJON, CA 92021	
Title:	D	( ) Delete
Name:	BROOKS, CHRIS	
Address:	281 BELL BRANCH LANE	
City-St-Zip:	JACKSONVILLE, FL 32259	
Title:	D	( ) Delete
Name:	WEEMS, CHARLES S IV	
Address:	2315 BAYVIEW RD.	
City-St-Zip:	JACKSONVILLE, FL 32210	
Title:	D	( ) Delete
Name:	AQUIAR, DANA	
Address:	9 JAMES ST.	
City-St-Zip:	POUGHKEEPSIE, NY 12603	
Title:	D	( ) Delete
Name:	SHARP, STEVE	
Address:	29 CONNELLY DR.	
City-St-Zip:	STAATSBURG, NY 12580	

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:	
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: MICHELE VANOVEN DIR 05/03/2003

Electronic Signature of Signing Officer or Director — Date