

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # N01000005870**

1. Entity Name  
WORLD LIFE LINE MINISTRIES, INC.



**FILED**  
**Apr 15, 2005 08:00 AM**  
**Secretary of State**

Principal Place of Business  
5504 ALHAMBRA DR.  
ORLANDO, FL 32808

Mailing Address  
5504 ALHAMBRA DR.  
ORLANDO, FL 32808



**DO NOT WRITE IN THIS SPACE**

01232005 No Chg-NP CR2E037 (10/03)

4. FEI Number  
37-1435980

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

NELSON, RILEY H DR.  
5504 ALHAMBRA DR  
ORLANDO, FL 32808

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25  
Due by May 1, 2005

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NELSON, RILEY H DR. 5504 ALHAMBRA DR ORLANDO, FL 32808
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S NELSON, MERLENE A R.N. 5504 ALHAMBRA DR. ORLANDO, FL 32808
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHITE, FREDERICK A PASTOR 2451 CRICKETWOOD CT. APOPKA, FL 32703
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLAYTON, ORVIL 112 LEON CT. FERN PARK, FL 32730
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000307429

04/15/05-80054-021 61.25

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*World Life Line Ministries, Inc. J. R. Hudson pres.*

*4/13/05*

*407-293-0027*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #