2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006821

FILED Feb 01, 2006 Secretary of State

Entity Name: LIFE CHURCH OF JACKSONVILLE, INC.

Current Principal Place of Business: New Principal Place of Business:

9735 OLD ST. AUGUSTINE ROAD UNIT 13 JACKSONVILLE, FL 32257

Current Mailing Address: New Mailing Address:

1012 FLORA PARKE DRIVE JACKSONVILLE, FL 32259

FEI Number: 59-3743692 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LOVELL, STEVE 1012 FLORA PARKE DRIVE JACKSONVILLE, FL 32259 US

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:

Flateria Circulus of Business I Asset

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

T () Delete Title: T (X) Change () Addition LOVELL, STEVE Name: LOVELL, STEVE

 Name:
 LOVELL, STEVE
 Name:
 LOVELL, STEVE

 Address:
 1012 FLORA PARKE DRIVE
 Address:
 1012 FLORA PARKE DRIVE

 City-St-Zip:
 JACKSONVILLE, FL 32259
 City-St-Zip:
 JACKSONVILLE, FL 32259 US

Title: T () Delete Title: T (X) Change () Addition

Name: BIRT, RICHARD Name: BIRT, RICHARD
Address: 6413 COLGATE RD. Address: 6413 COLGATE RD.

City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: JACKSONVILLE, FL 32217 US

Name:BIRT, KATHERINEName:BIRT, KATHERINEAddress:6413 COLGATE RD.Address:6413 COLGATE RD.

City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: JACKSONVILLE, FL 32217 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: STEVE LOVELL P 02/01/2006