2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2007 8:00 am
Secretary of State
02-12-2007 90103 050 ****61.25

DOCUMENT # N01000006839

1. Entity Name

LIFESTREAM INTERNATIONAL MINISTRIES, INC.

Principal Place of Business	Mailing Address
124 DREW AVENUE SANFORD FL 32771 US	POST OFFICE BOX 1184 SANFORD FL 32772-1184 US

1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
124 Drew Ave.	124 Drew AVE
Suite, Apt. #, etc.: San Ford	Suite, Apt. #, etc.
City & State: Florida	City & State: Sanford, FL
Zip: 32771 Country: US	Zip: 32771 Country: US

4. FEI Number: 59-3709455 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MOBLEY, WILLIAM L
124 DREW AVENUE
SANFORD FL 32771

7. Name and Address of New Registered Agent

Name: KARLA L. HENRY-SMITH
Street Address (P.O. Box Number is Not Acceptable): 2905 WESTERN WILLOW TERRACE
City: ORLANDO FL Zip Code: 32808

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: KARLA L. HENRY-SMITH Karla L. Henry-Smith 01-18-07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	PT SMITH-MOBLEY, PAZARIA 124 DREW STREET SANFORD FL 32771	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	BOD KAFFIE M. BRADLEY APT 1, CASTLE BREWER COURT SANFORD, FL 32771	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	DT BRADLEY, WALTER 831 VALENCIA STREET SANFORD FL 32771	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	BOD PATRICIA Woods 2273 NE 54th street Ocala, Fl 34479	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	STD HENRY, KARLA L 2905 WESTERN WILLOW TERRACE ORLANDO FL 32808	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	BOD Frank Woods, III 2273 NE 54th street Ocala, FL 34479	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	BOD MOBLEY, WILLIAM L 124 DREW AVE SANFORD FL 32771	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	Counselor/Advisor Sharon Riggins-Patterson 2400 Chase Ave/P.O.Box671 Sanford, Fl 32772	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	BOD SMITH, IDA M 124 DREW AVE SANFORD FL 32771	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	Counselor/ Advisor MINNie Royal 2273 NE 54th Street Ocala, Fl 34479	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Pazaria Smith-Mobley PAZARIA SMITH-MOBLEY 01/18/07 (407)562-8000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #