2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006839

FILED Apr 15, 2009 Secretary of State

Entity Name: LIFESTREAM INTERNATIONAL MINISTRIES, INC.

	rincipal Plac	e of Business:	New Principal Place of Business:
	W AVENUE D, FL 32771	US	
Current N	/lailing Addre	ess:	New Mailing Address:
	W AVENUE D, FL 32771	US	
FEI Number	r: 59-3709455	FEI Number Applied For()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and	d Address of	Current Registered Agent	: Name and Address of New Registered Agent:
2905 WES	SMITH, KARLA STERN WILLO O, FL 32808		SMITH, KARLA L 2905 WESTERN WILLOW TERR. ORLANDO, FL 32808 US
	e named entity e of Florida.	submits this statement for the	he purpose of changing its registered office or registered agent, or both,
SIGNATU	RE: KARLA	SMITH	04/15/2009
	Electro	nic Signature of Registered	Agent Date
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	PT (SMITH-MOBLI 124 DREW S ^T SANFORD, FL	FREET	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	DT (BRADLEY, W. 831 VALENCI SANFORD, FL	A STREET	Title: () Change () Addition Name: Address: City-St-Zip:
Title:	HENRY, KARI) Delete .A L RN WILLOW TERRACE	Title: STD (X) Change () Addition Name: SMITH, KARLA L Address: 2905 WESTERN WILLOW TERRACE
Address:	ORLANDO, FL	_ 32808	City-St-Zip: ORLANDO, FL 32808
Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:) Delete LLIAM L /E	
Address: City-St-Zip: Title: Name: Address:	BOD (MOBLEY, WIL 124 DREW AV SANFORD, FL BOD (BRADLEY, KA) Delete LLIAM L /E . 32771) Delete VFFIE M E BREWER CT.	City-St-Zip: ORLANDO, FL 32808 Title: () Change () Addition Name: Address:

I hereby certify that the information supplied with this filing does not qualify 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: PAZARIA SMITH MOBLEY PT 04/15/2009