

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008932

FILED
May 13, 2005
Secretary of State

Entity Name: LIFESPRING COMMUNITY CHURCH OF FLORIDA, INC.

Current Principal Place of Business:

3442 TAMPA ROAD
C
PALM HARBOR, FL 34684

New Principal Place of Business:

Current Mailing Address:

1344 PINE RIDGE CIR E #A3
TARPON SPRINGS, FL 34688

New Mailing Address:

FEI Number: 04-3657967 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HEIER, PAUL
1344 PINE RIDGE CIR E #A3
TARPON SPRINGS, FL 34688 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HEIER, PAUL
Address: 1344 PINE RIDGE CIR E #A3
City-St-Zip: TARPON SPRINGS, FL 34688

Title: D () Delete
Name: ROZYCKI, CHRISTOPHER
Address: 1344 PINE RIDGE CIR E #A3
City-St-Zip: TARPON SPRINGS, FL 34688

Title: D () Delete
Name: JOHNSON, GARY
Address: 9 SUNNYPPOINT COURT
City-St-Zip: OLDSMAR, FL 34677

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:

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: PAUL HEIER

DR.

05/13/2005

Electronic Signature of Signing Officer or Director

Date