

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003929

FILED  
Feb 03, 2009  
Secretary of State

Entity Name: SPIRIT OF LIFE MINISTRIES, ORLANDO, INC.

**Current Principal Place of Business:**

906 S ORANGE BLOSSOM TRAIL  
APOPKA, FL 32703

**New Principal Place of Business:**

**Current Mailing Address:**

906 S ORANGE BLOSSOM TRAIL  
APOPKA, FL 32703

**New Mailing Address:**

FEI Number: 04-3669740

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RIDGWAY SR., GARY P PASTOR  
906 SOUTH ORANGE BLOSSOM TRAIL.  
APOPKA, FL 32703 US

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

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: PCT ( ) Delete  
Name: RIDGWAY, GARY P SR.  
Address: 4507 PLYMONT SORRENTO RD  
City-St-Zip: APOPKA, FL 32712

Title: VM ( ) Delete  
Name: VELAZQUEZ, LIBERTAD  
Address: 7718 LAKE ANDREA CIR.  
City-St-Zip: MOUNT DORA, FL 32757

Title: SD ( ) Delete  
Name: MESSERSCHMITT, NATALIE  
Address: 3614 BENITO JUAREZ CIRCLE  
City-St-Zip: APOPKA, FL 32712

Title: T ( ) Delete  
Name: NOBLES, RAY  
Address: 672 TRAILWOOD DR.  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: T ( ) Delete  
Name: HODGES, TERRY L  
Address: 321 TANGERENE ST  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: T ( ) Delete  
Name: JOHNSON, RICKEY  
Address: 2007 PICNIC LANE  
City-St-Zip: APOPKA, FL 32703

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PCT (X) Change ( ) Addition  
Name: RIDGWAY, GARY P SR.  
Address: 6758 ONEIDA DR  
City-St-Zip: MT. DORA, FL 32757

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: DEMAYO, ETHON  
Address: 6750 ONEIDA DR.  
City-St-Zip: MT. DORA, FL 32757

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: LIBERTAD VELAZQUEZ

VM

02/03/2009

Electronic Signature of Signing Officer or Director

Date