2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 06, 2009
Secretary of State

DOCUMENT# N02000005929

Entity Name: LAMB OF GOD LIFE MINISTRIES, INC.

Current Principal Place of Business:

1924 N. PACE BLVD
PENSACOLA, FL 32505

New Principal Place of Business:

Current Mailing Address:

8078 CONRAD COURT
PENSACOLA, FL 32507

New Mailing Address:

FEI Number: 81-0565810 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

SCHUYLER, JR., IRVING W
8078 CONRAD COURT
PENSACOLA, FL 32507 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:	D	( ) Delete
Name:	LINDSEY, VICTOR SR	
Address:	3004 GODWIN LANE	
City-St-Zip:	PENSACOLA, FL 32526	
Title:	VP	( ) Delete
Name:	SCHUYLER, VERNA D	
Address:	8078 CONRAD COURT	
City-St-Zip:	PENSACOLA, FL 32507	
Title:	TD	( ) Delete
Name:	SIMS, SHERILENA	
Address:	550 SOUTH FIRST STREET	
City-St-Zip:	PENSACOLA, FL 32507	
Title:	TD	( ) Delete
Name:	BRADLEY, BARBARA L	
Address:	7531 WEAVER DRIVE	
City-St-Zip:	PENSACOLA, FL 32534	
Title:	TS	( ) Delete
Name:	CRUM, BETTY R	
Address:	8491 OLD SPANISH TRAIL ROAD	
City-St-Zip:	PENSACOLA, FL 32514	

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:	
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 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: IRVING W. SCHUYLER, JR. PAST 06/06/2009
Electronic Signature of Signing Officer or Director — Date