

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007867

FILED
Apr 20, 2009
Secretary of State

Entity Name: RIGHT LIFE INTERNATIONAL CHURCH OF THE LIVING GOD, INC.

Current Principal Place of Business:

1459 W UNION ST
JACKSONVILLE, FL 32209

New Principal Place of Business:

Current Mailing Address:

P O BOX 43611
JACKSONVILLE, FL 322033611

New Mailing Address:

FEI Number: 02-0614488

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBERTSS, WALLERIA L
420 PHELPS STREET
JACKSONVILLE, FL 32206 US

Name and Address of New Registered Agent:

ROBERTS, WALTEIA L
420 PHELPS STREET
JACKSONVILLE, FL 32206 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: WALTEIA L ROBERTS

04/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BROWN, WALTER L
Address: 1490 MITCHELL ST
City-St-Zip: JACKSONVILLE, FL 322093974

Title: V () Delete
Name: STEPHENS, ELLA M
Address: 416 SMITH ST
City-St-Zip: JACKSONVILLE, FL 32205

Title: S () Delete
Name: PICKETT, SYLVIA C
Address: 6618 JUNIPER CREEK DR
City-St-Zip: JACKSONVILLE, FL 32244

Title: T () Delete
Name: BROWN, REGINALD C
Address: 2712 STARDUST CT, APT. 7
City-St-Zip: JACKSONVILLE, FL 32211

Title: D () Delete
Name: LONTRAVIUS, WALKER
Address: 2434 TOWSEND BLVD
City-St-Zip: JACKSONVILLE, FL 32211

Title: D () Delete
Name: BROWN, ROSALIND D
Address: 4431 RALEIGH ST
City-St-Zip: ORLANDO, FL 32811

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: D (X) Change () Addition
Name: EASON, JOHN
Address: 4431 RALEIGH ST
City-St-Zip: ORLANDO, FL 32811

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: WALTER L BROWN

P

04/20/2009

Electronic Signature of Signing Officer or Director

Date