

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008126

FILED
Apr 30, 2008
Secretary of State

Entity Name: LIFE CHANGERS CHURCH INTERNATIONAL, INC.

Current Principal Place of Business:

1244 ALIBABA RD
OPA LOCKA, FL 33055

New Principal Place of Business:

1244 ALIBABA AVE.
OPA LOCKA, FL 33055

Current Mailing Address:

18781 NW 78TH PLACE
HIALEAH, FL 33015

New Mailing Address:

FEI Number: 20-0964047

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CLARK, TORRIAN D BISHOP
18781 NW 78TH PLACE
HIALEAH, FL 33015 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: PTD () Delete
Name: CLARK, TORRIAN
Address: 18781 NW 78TH PLACE
City-St-Zip: HAILEAH, FL 33015

Title: VD () Delete
Name: JOSEPH, ROD
Address: 18781 NW 78TH PLACE
City-St-Zip: HIALEAH, FL 33015

Title: VD () Delete
Name: MERILIEN, ADNER
Address: 173 N.W. 99TH STREET
City-St-Zip: MIAMI, FL 33150

Title: SD () Delete
Name: FORTUNE, CINDY
Address: 1550 NE 109 ST
City-St-Zip: NORTH MIAMI, FL 33161

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:

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: CINDY FORTUNE

SD

04/30/2008

Electronic Signature of Signing Officer or Director

Date