

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008786

Entity Name: LIFELINE MINISTRIES, INC.

FILED
Sep 07, 2004
Secretary of State

Current Principal Place of Business:

4826 INDIALANTIC DRIVE
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

4826 INDIALANTIC DRIVE
ORLANDO, FL 32808

New Mailing Address:

FEI Number: 11-3662170

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, ELLA
4826 INDIALANTIC DRIVE
ORLANDO, FL 32808 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: CEO () Delete
Name: LEWIS, ELLA
Address: 4826 INDIALANTIC DRIVE
City-St-Zip: ORLANDO, FL 32808

Title: D () Delete
Name: LEWIS, EUGENE SR.
Address: 4826 INDIALANTIC DRIVE
City-St-Zip: ORLANDO, FL 32808

Title: D () Delete
Name: LEWIS-WHITTINGTON, VIRGINIA
Address: 6512 KRISTIN COURT
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: WHITTINGTON, STACEY
Address: 6512 KRISTIN COURT
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: KING, PHYLLIS
Address: 11015 NW 27TH PL
City-St-Zip: SUNRISE, FL 33322

Title: D () Delete
Name: KING, TOMMY
Address: 11015 NW 27TH PL
City-St-Zip: SUNRISE, FL 33322

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
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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: VIRGINIA LEWIS-WHITTINGTON

D

09/07/2004

Electronic Signature of Signing Officer or Director

Date