2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002033

Entity Name: GOSPEL LIGHT CHURCH, INC

FILED Jan 13, 2009 Secretary of State

y) () () () () () () () () () (
Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
5800 STRAWBERRY LAKES CIRCLE LAKE WORTH, FL 33463				5300 HAVERHILL RD GREENACRES, FL 33463	
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
5800 STRAWBERRY LAKES CIRCLE LAKE WORTH, FL 33463			P.O.BOX 540463 LAKE WORTH, FL 3	P.O.BOX 540463 LAKE WORTH, FL 33463	
FEI Number:	: 16-1657586 FEI Numbe	r Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
BORGELIN, AGUENES REV. 5800 STRAWBERRY LAKES CIRCLE LAKE WORTH, FL 33463 US			5200 SUNSEEKER E	BORGELIN, AGUENES REV. 5200 SUNSEEKER BLVD GREENACRES, FL 33463 US	
	named entity submits this e of Florida.	statement for the	purpose of changing its register	red office or registered agent, or both,	
SIGNATURE:				01/13/2009	
	Electronic Signature	of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D () Delete BORGELIN, AGUENES REV. 5800 STRAWBERRY LAKES LAKE WORTH, FL 33463	CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete CHOULOUTE, JOCELINE 3067 LILLIANE LANE MARGATE, FL 33063		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete GARDIEN, JEAN 7337 NAUTICA WAY LAKE WORTH, FL 33463		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete BAPTISTE, MARIE 5968 TRIPHAMMER ROAD LAKE WORTH, FL 33463		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: AGUENES BORGELIN PAST 01/13/2009