

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004461

FILED
Jan 06, 2009
Secretary of State

Entity Name: LIFE EDUCATION MINISTRY, INC.

Current Principal Place of Business:

8420-F S.W. 93RD LANE
OCALA, FL 34481

New Principal Place of Business:

Current Mailing Address:

8420-F S.W. 93RD LANE
OCALA, FL 34481

New Mailing Address:

PO BOX 770011
OCALA, FL 34477

FEI Number: 58-2675386

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RYAN, MABEL W
8420-F S.W. 93RD LANE
OCALA, FL 34481 US

Name and Address of New Registered Agent:

RYAN, MABEL W PRES
8420-F S.W. 93RD LANE
OCALA, FL 34481 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: MABEL W RYAN DPT

01/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: RYAN, MABEL W
Address: 8420-F S.W. 93RD LANE
City-St-Zip: OCALA, FL 34481

Title: DVS () Delete
Name: BERG, KAREN
Address: 4108 S.W. 22ND STREET
City-St-Zip: OCALA, FL 34474

Title: D () Delete
Name: O'DOHERTY, FATHER PATRICK J
Address: 6455 S.W. STATE ROAD 200
City-St-Zip: OCALA, FL 34476

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:

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: MABEL W RYAN PRES TREAS DIRECTOR

DPT

01/06/2009

Electronic Signature of Signing Officer or Director

Date