2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010790

Entity Name: LIFE CHRISTIAN MINISTRIES, INC.

FILED Apr 09, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1461 CEDAR PINE DR.1922 GOLF OAK DR.DELTONA, FL 32725ORANGE CITY, FL 32763

Current Mailing Address: New Mailing Address:

1461 CEDAR PINE DR. 1922 GOLF OAK DR. DELTONA, FL 32725 ORANGE CITY, FL 32763

FEI Number: 20-0549593 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LUBA, STEPHEN J

1461 CEDAR PINE DR.
DELTONA, FL 32725 US

LUBA, STEPHEN J

1922 GOLF OAK DR.
ORANGE CITY, FL 32763 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: STEPHEN LUBA 04/09/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 MR
 () Delete
 Title:
 MR
 (X) Change () Addition

 Name:
 LUBA, STEPHEN J

 Name:
 LUBA, STEPHEN J

 Address:
 1461 CEDAR PINE DR
 Address:
 1922 GOLF OAK DR.

 City-St-Zip:
 DELTONA, FL 32725 US
 City-St-Zip:
 ORANGE CITY, FL 32763 US

Title: MRS () Delete Title: MRS (X) Change () Addition

 Name:
 LUBA, ROSANNE M
 Name:
 LUBA, ROSANNE M

 Address:
 1461 CEDAR PINE DR
 Address:
 1922 GOLF OAK DR.

 City-St-Zip:
 DELTONA, FL 32725 US
 City-St-Zip:
 ORANGE CITY, FL 32763 US

Title: MR () Delete Title: () Change () Addition

 Name:
 KING, FRANKLIN
 Name:

 Address:
 310 SOUTH LAKEWOOD DR
 Address:

 City-St-Zip:
 ORLANDO, FL 32803
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: STEPHEN LUBA MR 04/09/2006