

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005031

FILED  
Apr 30, 2008  
Secretary of State

**Entity Name:** RESTORATION OF LIFE CATHEDRAL, INCORPORATED

**Current Principal Place of Business:**

2708 N AUSTRALIAN AVE SUITE 1  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1911  
WEST PALM BEACH, FL 33402

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

STUBBS, VALENCIA Y  
2708 N AUSTRALIAN AVE SUITE 1  
WEST PALM BEACH, FL 33407 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: D ( ) Delete  
Name: STUBBS, STEPHEN A BISHOP  
Address: 844 RYANWOOD DR  
City-St-Zip: WEST PALM BEACH, FL 33413

Title: D ( ) Delete  
Name: STUBBS, VALENCIA Y  
Address: 844 RYANWOOD DR  
City-St-Zip: WEST PALM BEACH, FL 33413

Title: D ( ) Delete  
Name: SLEDGE, PHILLIP K  
Address: 1117 WEST 32ND STREET  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: D ( ) Delete  
Name: GRANT, TRACEY  
Address: 3526 WHITEHALL DR  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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:

Title: D ( ) Change (X) Addition  
Name: KELLY, VALICIA A  
Address: 995 WEST 10TH STREET  
City-St-Zip: RIVIERA BEACH, FL 33404

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: STEPHEN STUBBS

D

04/30/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date