

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006939

FILED  
Jan 13, 2009  
Secretary of State

Entity Name: UNITY LIFETREE CHRISTIAN CENTER, INC

**Current Principal Place of Business:**

20030 NE 23RD PLACE  
WILLISTON, FL 32696

**New Principal Place of Business:**

**Current Mailing Address:**

20030 NE 23RD PLACE  
WILLISTON, FL 32696

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BATTLES, WILLIE A  
1290 NE SR 121  
WILLISTON, FL 32696 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: P ( ) Delete  
Name: BATTLES, WILLIE A  
Address: 1290 NE SR 121  
City-St-Zip: WILLISTON, FL 32696

Title: V ( ) Delete  
Name: COUNCIL, ALFONSO  
Address: 5874 NW 64TH ST  
City-St-Zip: OCALA, FL 34482

Title: S ( ) Delete  
Name: WILSON, JOYCE  
Address: 5001 SW 20TH ST #3409  
City-St-Zip: OCALA, FL 34474

Title: T ( ) Delete  
Name: BATTLES, SHARON D  
Address: 1290 NE SR 121  
City-St-Zip: WILLISTON, FL 32696

Title: TR ( ) Delete  
Name: IVERY, JOHN  
Address: 15321 N HWY 441  
City-St-Zip: REDDICK, FL 32886

**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: ( ) 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: WILLIE A BATTLES

PRES

01/13/2009

Electronic Signature of Signing Officer or Director

Date