

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04817

FILED
Jul 26, 2009
Secretary of State

Entity Name: LIFE PATH CHRISTIAN CENTER, INC.

Current Principal Place of Business:

1190 EAST LAKE ROAD SOUTH
TARPON SPRINGS, FL 34688 US

New Principal Place of Business:

Current Mailing Address:

1190 EAST LAKE ROAD SOUTH
TARPON SPRINGS, FL 34688 US

New Mailing Address:

FEI Number: 59-2466252 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

VAUGHAN, JERRY
11611 TEE TIME CIRCLE
NEW PORT RICHEY, FL 34654 US

Name and Address of New Registered Agent:

WINDSTRUP, DANIEL
2409 GUN-FLINT TRAIL
PALM HARBOR, FL 34683 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: DANIEL WINDSTRUP

07/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VAUGHAN, JERRY
Address: 1611 TEE TIME CIRCLE
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: VP () Delete
Name: ADAMS, MARLIN
Address: 7329 CAPTIVA CIRCLE
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: D () Delete
Name: WOZNIAK, VINCE
Address: 100 HAMPTON RD UNIT 260
City-St-Zip: CLEARWATER, FL 33759

Title: T () Delete
Name: TAYLOR, LYNDA
Address: 1498 E LAKE WOODLAND PKWY
City-St-Zip: OLDSMAR, FL 34677

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WOZNIAK, VINCE
Address: 100 HAMPTON RD UNIT 260
City-St-Zip: CLEARWATER, FL 33759

Title: VP (X) Change () Addition
Name: GIAR, THOMAS
Address: 1525 RIVERDALE DR
City-St-Zip: OLDSMAR, FL 34677

Title: D (X) Change () Addition
Name: WINDSTRUP, ED
Address: 275 MAPLE AVE
City-St-Zip: PALM HARBOR, FL 34684

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: LYNDA TAYLOR

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07/26/2009

Electronic Signature of Signing Officer or Director

Date