2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000935

FILED Apr 11, 2008 Secretary of State

Entity Name: LIGHT OF THE WORLD CHURCH AND TRAINING CENTER, INC.

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

2730 SOUTH US 1 SUITE 103-104

FT. PIERCE, FL 34982 US

Current Mailing Address: New Mailing Address:

P.O. BOX 12966 P.O. BOX 12966

FT. PIERCE, FL 34979 US

FEI Number: 25-1907537 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

LEIPHON, JOYCE 1635 LAUREL LEAF LN

FT. PIERCE, FL 34950 US

LEIPHON, JOYCE 370 NW SHEFFIELD CIRCLE PORT SAINT LUCIE, FL 34983 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: 04/11/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 LEIPHON, JOYCE
 Name:
 LEIPHON, JOYCE

 Address:
 1635 B LAUREL LEAF LN.
 Address:
 370 NW SHEFFIELD CIRCLE

 City-St-Zip:
 FT. PIERCE, FL 34950 US
 City-St-Zip:
 PORT SAINT LUCIE, FL 34983 US

Title: D () Delete Title: () Change () Addition

 Name:
 LOYD, MARY A
 Name:

 Address:
 661 W. LANCASTER RD.
 Address:

 City-St-Zip:
 ORLANDO, FL 32809 US
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 LOYD, ANDREW
 Name:

 Address:
 661 W. LANCASTER RD
 Address:

 City-St-Zip:
 ORLANDO, FL 32809 US
 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: JOYCE LEIPHON PRES 04/11/2008