## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000001623

FILED May 06, 2008 Secretary of State

Entity Name: LORD'S CALLING MINISTRIES CORPORATION

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

1130 LAKE SHORE DR #103 378 NORTH LAKE BLVD

LAKE PARK, FL 33403 US #143

NORTH PALM BEACH, FL 33408 US

Current Mailing Address: New Mailing Address:

1130 LAKE SHORE DR #103 378 NORTH LAKE BLVD

LAKE PARK, FL 33403 US #143

NORTH PALM BEACH, FL 33408 US

FEI Number: 20-2447694 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: Name and Address of New Registered Agent:

WADE, FREDERIC P WADE, FREDERIC P 1130 LAKE SHORE DRIVE 378 NORTHLAKE BLVD

#103 LAKE SHORE DRIVE 3/8 NORTHLAKE BLVI

LAKE PARK, FL 33403 US NORTH PALM BEACH, FL 33408 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: FREDERIC P WADE 05/06/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: WADE, FREDERIC P Name: WADE, FREDERIC P

 Address:
 1130 LAKE SHORE DR #103
 Address:
 378 NORTHLAKE BLVD, #143

 City-St-Zip:
 LAKE PARK, FL 33403
 City-St-Zip:
 NORTH PALM BEACH, FL 33408 US

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

 Name:
 BARKER, JOHN F
 Name:

 Address:
 2011 KNITTLE CIRCLE
 Address:

 City-St-Zip:
 NEW SMYRNA BEACH, FL 32168
 City-St-Zip:

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

 Name:
 ARPIN, FREDERICK
 Name:

 Address:
 1318 HAZEL BROOK LANE
 Address:

 City-St-Zip:
 MARSHALL, NC 28753
 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: FREDERIC P WADE PRES 05/06/2008