

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002514

FILED  
Jan 06, 2010  
Secretary of State

**Entity Name:** COMMUNITY LIFE CHURCH, INC.

**Current Principal Place of Business:**

4734 WOODMERE ROAD  
LAND O LAKES, FL 34639

**New Principal Place of Business:**

5701 N 20TH STREET  
TAMPA, FL 33610

**Current Mailing Address:**

P.O. BOX 48105  
TAMPA, FL 33646

**New Mailing Address:**

5701 N 20TH STREET  
TAMPA, FL 33610

**FEI Number:** 43-2076019

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ORTIZ, SAMUEL  
4734 WOODMERE ROAD  
LAND O LAKES, FL 34639 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  
Name: ORTIZ, SAMUEL  
Address: 4734 WOODMERE ROAD  
City-St-Zip: LAND O LAKES, FL 34639

Title: V/S  
Name: ORTIZ, LORETTA  
Address: 4734 WOODMERE ROAD  
City-St-Zip: LAND O LAKES, FL 34639

Title: T  
Name: MARTIN, TYLER  
Address: 535 52ND AVE. NORTH  
City-St-Zip: ST PETERSBURG, FL 33703

Title: O  
Name: MARQUES, JOHN  
Address: 17104 CARRINGTON PARK DRIVE #520  
City-St-Zip: TAMPA, FL 33647

Title: O  
Name: DOGUILLES, RICARDO  
Address: 4025 ANGEL OAK CT #103  
City-St-Zip: TAMPA, FL 33613

I hereby 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 all other like empowered.

SIGNATURE: SAMUEL ORTIZ

P

01/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date