## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000005825

Entity Name: SIGNIFICANT LIVING MINISTRIES, INC.

FILED Apr 27, 2007 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

4653 S.W. 105TH DRIVE 4653 S.W. 105TH DRIVE GAIENESVILLE, FL 32608 GAINESVILLE, FL 32608

Current Mailing Address: New Mailing Address:

4653 S.W. 105TH DRIVE 4653 S.W. 105TH DRIVE GAIENESVILLE, FL 32608 GAINESVILLE, FL 32608

FEI Number: 14-1941698 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GARDNER, MERRITT A ESQ
401 EAST JACKSON STREET STE 2400
TAMPA, FL 33602 US
GARDNER, MERRITT A ESQ
5415 MARINER STREET
WATERMARK 5, SUITE 200
TAMPA, FL 33609 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: 04/27/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: WHITAKER, SCOTT L Name: WHITAKER, SCOTT L

 Name:
 Will Taker, 35511 E

 Address:
 4653 S.W. 105TH DRIVE

 City-St-Zip:
 GAIENESVILLE, FL 32608

 City-St-Zip:
 GAINESVILLE, FL 32608

Title: Title: (X) Change ( ) Addition ( ) Delete CARMICHAEL, MICHAEL J MD CARMICHAEL, MICHAEL J MD Name: Name: Address: 1511 SW FIRST AVE Address: 1815 SW 55TH STREET ROAD City-St-Zip: OCALA, FL 34474 City-St-Zip: OCALA, FL 34474

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

 Name:
 SPENCER, KENDALL
 Name:
 SPENCER, KENDALL

 Address:
 13840 ADMIRAL'S BEND DRIVE
 Address:
 13840 ADMIRAL'S BEND DRIVE

 City-St-Zip:
 JACKSONVILLE, FL 32245
 City-St-Zip:
 JACKSONVILLE, FL 32225

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: SCOTT L. WHITAKER D 04/27/2007