

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007704

FILED
Jan 09, 2008
Secretary of State

Entity Name: OUR REDEEMER LIVES, INC.

Current Principal Place of Business:

8535 BAYMEADOWS ROAD
SUITE 31
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

8535 BAYMEADOWS ROAD
SUITE 31
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 20-3251145

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GAVIN, R. KYLE
225 WATER ST STE 1500
JACKSONVILLE, FL 32202 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: D () Delete
Name: EDWARDS, DREW
Address: 8535 BAYMEADOWS ROAD, SUITE 31
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: REILLY, MARY
Address: 8535 BAYMEADOWS ROAD, SUITE 31
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: MORRIS, SUSAN
Address: 8535 BAYMEADOWS ROAD, SUITE 31
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: CAPELL, JIM
Address: 8535 BAYMEADOWS ROAD, SUITE 31
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: LAFFERTY, SHAUN
Address: 8535 BAYMEADOWS ROAD, SUITE 31
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: PARSONS, HARRY
Address: 8535 BAYMEADOWS ROAD, SUITE 31
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MS. (X) Change () Addition
Name: MORRIS, SUSAN
Address: 8535 BAYMEADOWS ROAD, SUITE 31
City-St-Zip: JACKSONVILLE, FL 32256

Title: MS. (X) Change () Addition
Name: BOYCE, GERRI
Address: 8535 BAYMEADOWS ROAD, SUITE 31
City-St-Zip: JACKSONVILLE, FL 32256

Title: MR. (X) Change () Addition
Name: TULLIS, JAMES
Address: 8535 BAYMEADOWS ROAD, SUITE 31
City-St-Zip: JACKSONVILLE, FL 32256

Title: MR. (X) Change () Addition
Name: CAPELL, JAMES
Address: 8535 BAYMEADOWS ROAD, SUITE 31
City-St-Zip: JACKSONVILLE, FL 32256

Title: MR (X) Change () Addition
Name: SKINNER, CHARLES
Address: 8535 BAYMEADOWS ROAD, SUITE 31
City-St-Zip: JACKSONVILLE, FL 32256

Title: MRS. (X) Change () Addition
Name: STICH, BETTY
Address: 8535 BAYMEADOWS ROAD, SUITE 31
City-St-Zip: JACKSONVILLE, FL 32256

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: SUSAN MORRIS

MS.

01/09/2008

Electronic Signature of Signing Officer or Director

Date