## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000009938

Address: City-St-Zip:

FILED Sep 22, 2009 Secretary of State

Entity Name: THE FAMILY LIFE WORSHIP CENTER, INC.				
Current Principal Place of Business:		New Principal Place of Business:		
701 S.W. TULIP BLVD. PORT ST. LUCIE, FL 34593		9221 SE CIVIC CENTER PLACE . PORT ST. LUCIE, FL 34983		
Current Mailing Address:		New Mailing Address:		
701 S.W. TULIP BLVD. PORT ST. LUCIE, FL 34593		P.O. BOX 880542 PORT ST. LUCIE, FL 34988		
FEI Number: In accordance	26-0438095 FEI Number Applied For ( ) FEI Number with s. 607.193(2)(b), F.S., the corporation did not receive	mber Not Appli the prior notice		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
GAYLE, DARREN D 701 S.W. TULIP BLVD. PORT ST. LUCIE, FL 34593 US		DUNCAN, CHRISTOPHER L 997 ALTAMIRA STREET PALM BAY, FL 32907 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: CHRISTOPHER DUNCAN			09/22/2009	
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PRES () Delete GAYLE, DARREN D 701 S.W. TULIP BLVD PORT ST. LUCIE, FL 34593	Title: Name: Address: City-St-Zip:	P, D (X) Change ( ) Addition GAYLE, DARREN D FOUNDER P.O. BOX 880542 PORT ST. LUCIE, FL 34988	
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	VP,D () Change (X) Addition GAYLE, SUZETTE I EXE-DIR P.O. BOX 880542 PORT ST. LUCIE, FL 34988	
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	TRES () Change (X) Addition SAWYER, ROSE 1770 ANNANDALE CIRCLE WEST PALM BEACH, FL 33411	
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	SEC () Change (X) Addition DUNCAN, CHRISTOPHER L P.O. BOX 880542 PORT ST. LUCIE, FL 34988	
Title: Name:	( ) Delete	Title: Name:	DIR ( ) Change (X) Addition BELL, ERIC	

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.

Address:

City-St-Zip:

777 SW TULIP BOULEVARD

PORT ST. LUCIE, FL 34953

SIGNATURE: SUZETTE I. GAYLE VΡ 09/22/2009