

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011620

FILED
Apr 10, 2009
Secretary of State

Entity Name: LIBERTY INITIATING FRONTLINE EVANGELISM INC.

Current Principal Place of Business:

14926 NE SHANNONDOAH RD
HOSFORD, FL 32334

New Principal Place of Business:

13305 NW PEA RIDGE ROAD
BRISTOL, FL 32321

Current Mailing Address:

PO BOX 341
HOSFORD, FL 32334

New Mailing Address:

PO BOX 156
BRISTOL, FL 32321

FEI Number: 20-5824992

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DUGGAR, CLEMENT D
14926 NE SHANNONDOAH RD
HOSFORD, FL 32334 US

Name and Address of New Registered Agent:

DUGGAR, CLEMENT D
13305 NW PEA RIDGE ROAD
BRISTOL, FL 32321 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:

04/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DUGGAR, CLEMENT D 14926 N
Address: E SHANNONDOAH RD, PO BOX 341
City-St-Zip: HOSFORD, FL 32334

Title: VP () Delete
Name: REVELL, CATHY BROCK
Address: 13489 NW PEA RIDGE RD
City-St-Zip: BRISTOL, FL 32321

Title: ST () Delete
Name: BLACK, HUGH
Address: 23572 NE BLUE CREEK RD
City-St-Zip: HOSFORD, FL 32334

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DUGGAR, CLEMENT D
Address: 12958 CHELLE DRIVE
City-St-Zip: SODDY DAISY, TN 37379

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: HUGH C. BLACK

ST

04/10/2009

Electronic Signature of Signing Officer or Director

Date