

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N07000002553

1. Entity Name
THE APOSTLE HENRY ROSS SR. FAMILY LIFE CENTER,
INC.



Principal Place of Business
1302 MARTIN LUTHER KING JR. BLVD.
LAKELAND, FL 33805

Mailing Address
1302 MARTIN LUTHER KING JR. BLVD.
LAKELAND, FL 33805

2. Principal Place of Business - No P.O. Box #
1302 MARTIN LUTHER KING JR. AVE
Suite, Apt. #, etc.

3. Mailing Address
1302 MARTIN LUTHER KING JR. AVE
Suite, Apt. #, etc.

City & State
LAKELAND, FL

City & State
LAKELAND, FL

4. FEI Number
05-0089600

Applied For
Not Applicable

Zip
33805

Country

Zip
33805

Country

07082008 Chg-NP CR2E037 (12/06)



6. Name and Address of Current Registered Agent

SLATER, RUFUS E.
1302 MARTIN LUTHER KING JR. BLVD.
LAKELAND, FL 33805

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D
NAME SLATER, RUFUS E. ☐ Delete
STREET ADDRESS 1302 MARTIN LUTHER KING JR. BLVD.
CITY-ST-ZIP LAKELAND, FL 33805

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE T ☐ Change ☒ Addition
NAME McGee, Robert
STREET ADDRESS 1825 BELLGROVE ST
CITY-ST-ZIP LAKELAND, FL 33805

TITLE T ☐ Change ☒ Addition
NAME CARSON, KENNETH
STREET ADDRESS 201 LINDALE ST
CITY-ST-ZIP LAKELAND, FL 33809

TITLE ☐ Change ☐ Addition
NAME 500136303845
STREET ADDRESS 09/24/08--01024--006 **61.25
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Rufus E. Slater
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rufus E. Slater

9/22/08

(863) 686-7003

Date

Daytime Phone #