2005 CORPORATION ANNUAL REPORT

FILED
Mar 15, 2005
Secretary of State

DOCUMENT# N07000006539

Entity Name: LIFESPRING OUTREACH MINISTRIES, INC.

Current Principal Place of Business:

1886 LONGWOOD LAKE MARY ROAD
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

1886 LONGWOOD LAKE MARY ROAD
LONGWOOD, FL 32750

New Mailing Address:

FEI Number: 59-3389016 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AKERS, STEPHEN W
1886 LONGWOOD LAKE MARY ROAD
LONGWOOD, FL 32750 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DS ( ) Delete
Name: HENSLEY, NELL
Address: 9727 BEAR LAKE RD.
City-St-Zip: APOPKA, FL 32703

Title: D ( ) Delete
Name: MANNY, RITA K.
Address: 1699 HILLSIDE DR
City-St-Zip: LONGWOOD, FL

Title: DV ( ) Delete
Name: AKERS, CATHERINE A
Address: 1886 LONGWOOD LAKE MARY ROAD
City-St-Zip: LONGWOOD, FL

Title: D ( ) Delete
Name: HENSLEY, NELL
Address: 9727 BEAR LKAE RD
City-St-Zip: APOPKA, FL 32703

Title: DT ( ) Delete
Name: WILLIAMS, JOYCE E
Address: 7604 AVIANO AVE
City-St-Zip: ORALNDO, FL 32819

Title: D ( ) Delete
Name: HENSLEY II, JOHN H
Address: 9727 BEAR LAKE RD
City-St-Zip: APOPKA, FL 32703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DS (X) Change ( ) Addition
Name: BROADWAY, TISH
Address: 169 HERON BAY CIRCLE
City-St-Zip: LAKE MARY, FL 32746

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

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

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

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 for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHEN W. AKERS DP 03/15/2005
Electronic Signature of Signing Officer or Director Date