2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2008
Secretary of State

DOCUMENT# N07000008087

Entity Name: LIVING LIGHT MINISTRIES, INC.

Current Principal Place of Business:

4052 SANTA ANA
NORTH PORT, FL 34286

New Principal Place of Business:

Current Mailing Address:

4052 SANTA ANA
NORTH PORT, FL 34286

New Mailing Address:

FEI Number: 36-4335498 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HILDRETH, WILLIAM
4052 SANTA ANA
NORTH PORT, FL 34286 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: DP ( ) Delete
Name: HILDRETH, WILLIAM C
Address: 4052 SANTA ANA
City-St-Zip: NORTH PORT, FL 34286

Title: DV ( ) Delete
Name: TAMBURO, DANIEL JR
Address: 376 BRACKEN COURT
City-St-Zip: TROY, MI 48098

Title: DS ( ) Delete
Name: HILDRETH, LOU ANN
Address: 4052 SANTA ANA
City-St-Zip: NORTH PORT, FL 34286

Title: DT ( ) Delete
Name: LOWRIE, CHARLINA L
Address: 3523 BILLINGHAM LN
City-St-Zip: NORTH PORT, FL 34288

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: CHARLINA L LOWRIE DT 04/20/2008

Electronic Signature of Signing Officer or Director — Date