

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09401

FILED
Apr 27, 2009
Secretary of State

Entity Name: THE WAY OF LIFE MINISTRIES, INC.

Current Principal Place of Business:

638 NORTH PINE HILLS RD
ORLANDO, FL 32808 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 618072
ORLANDO, FL 32861 US

New Mailing Address:

FEI Number: 59-2576537 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WELCH, ROBERT EARL
638 NORTH PINE HILLS RD
ORLANDO, FL 32808 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: PD () Delete
Name: WELCH, ROBERT EARL
Address: 8435 ROSE GROVES RD
City-St-Zip: ORLANDO, FL 32818 US

Title: FD () Delete
Name: LONG, CHRISTINE
Address: 149 COOPER CT
City-St-Zip: ORLANDO, FL 32835 US

Title: VD () Delete
Name: JAMESON, JOANN
Address: 7714 AREZZO AVENUE
City-St-Zip: ORLANDO, FL 32819 US

Title: TD () Delete
Name: DESUE, LILLIE
Address: 2448 DODGE CT.
City-St-Zip: APOPKA, FL 32703 US

Title: D () Delete
Name: BARTLEY, FREDDIE
Address: 2505 LAUDERDALE CT.
City-St-Zip: ORLANDO, FL 32805 US

Title: SD (X) Delete
Name: WADE, CYNTHIA
Address: 524 ROSS PLACE
City-St-Zip: ORLANDO, FL 32805 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WELCH, ROBERT EARL
Address: 638 NORTH PINE HILLS ROAD
City-St-Zip: ORLANDO, FL 32808 US

Title: FD (X) Change () Addition
Name: LONG, CHRISTINE
Address: 638 NORTH PINE HILLS ROAD
City-St-Zip: ORLANDO, FL 32808 US

Title: VD (X) Change () Addition
Name: JAMESON, JOANN
Address: 638 NORTH PINE HILLS ROAD
City-St-Zip: ORLANDO, FL 32808 US

Title: TD (X) Change () Addition
Name: DESUE, LILLIE
Address: 638 NORTH PINE HILLS ROAD
City-St-Zip: ORLANDO, FL 32808 US

Title: SD (X) Change () Addition
Name: WADE, CYNTHIA
Address: 638 NORTH PINE HILLS ROAD
City-St-Zip: ORLANDO, FL 32808 US

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: ROBERT EARL WELCH

PD

04/27/2009

Electronic Signature of Signing Officer or Director

Date