2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 12, 2009
Secretary of State

DOCUMENT# N10955

Entity Name: RESTORATION LIFE CHURCH & OUTREACH CENTER, INC.

Current Principal Place of Business:

2302 JIM LEE RD
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

2302 JIM LEE RD
TALLAHASSEE, FL 32301 US

New Mailing Address:

FEI Number: 26-0264924 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JOHNSON, WILLIAM C
2302 JIM LEE RD.
TALLAHASSEE, FL 32301 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: D ( ) Delete
Name: MOORE, WILLIE
Address: 8480 PANACEA LANE
City-St-Zip: TALLAHASSEE, FL 32310

Title: D-P ( ) Delete
Name: JOHNSON, WILLIAM C
Address: 274 HAMON AVE
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D ( ) Delete
Name: LOVETT, ROSA
Address: 1401 HIGH HILL CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D-VP ( ) Delete
Name: JOHNSON, LINDA W
Address: 274 HAMON AVE
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: WILLIAM C JOHNSON D-P 05/12/2009

Electronic Signature of Signing Officer or Director — Date