

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20404

Entity Name: DEEPER LIFE CHRISTIAN MINISTRY INC.

FILED  
Apr 17, 2004  
Secretary of State

**Current Principal Place of Business:**

1527 SW ARGYLE DR.  
P. O. BOX 693  
FT. LAUDERDALE, FL 33302

**New Principal Place of Business:**

**Current Mailing Address:**

1527 SW ARGYLE DR.  
P. O. BOX 693  
FT. LAUDERDALE, FL 33302

**New Mailing Address:**

FEI Number: 59-2747784

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ORIGHO, CHRISTOPHER C.  
1119 N.W. 10TH PL.  
FT. LAUDERDALE, FL 33311 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: ORIGHO, CHRISTOPHER, C.  
Address: 1119 N.W 10TH PL.  
City-St-Zip: FT. LAUDERDALE, FL

Title: D ( ) Delete  
Name: ORIGHO, DAPHENY M.,  
Address: 1517 SW ARGYLE DR.  
City-St-Zip: FT. LAUDERDALE, FL

Title: SD ( ) Delete  
Name: JULIUS, MARTHA,  
Address: 1360 SW 34TH AVE.  
City-St-Zip: FT. LAUDERDALE, FL

Title: TD ( ) Delete  
Name: DIAZ, MARIA A  
Address: 331 NW 48TH TERRACE  
City-St-Zip: PLANTATION, FL 33317

Title: VD ( ) Delete  
Name: WILLIAMS, A. VIRGINI, A  
Address: 5711 NW 27 CT.  
City-St-Zip: LAUDERHILL, FL

Title: ATD ( ) Delete  
Name: KWANE, TWENEBOAH,  
Address: 4033 LAKESIDE DR.  
City-St-Zip: TAMARAC, FL. 33319,

**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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAPHENY ORIGHO

MS.

04/17/2004

Electronic Signature of Signing Officer or Director

Date