2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38101

FILED Jan 17, 2008 Secretary of State

Entity Name: LIFE MINISTRIES OF LABELLE, INC.

Current Principal Place of Business: New Principal Place of Business: 725 WEST HWY 80 725 WEST HWY 80 LABELLE, FL 33935 US P.O. BOX 1584 LABELLE, FL 33975 US **New Mailing Address: Current Mailing Address:** % RALPH ELVER P.O. DRAWER 2280 LABELLE, FL 33975 FEI Number: 65-0202092 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ELVER, RALPH ELVER, RALPH 461 HWY 29 SOUTH 301 W S.R. 80, SUITE 201 LABELLE, FL 33935 US LABELLE, FL 33935 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: 01/17/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition NICHOLSON, RALPH W MR. Name: Name: 1216 CAPTAIN HENDRY DR. Address: Address: City-St-Zip: LABELLE, FL 33935 US City-St-Zip: Title: () Delete Title: () Change () Addition WILLIAMS, DIANA MRS. Name: Name: Address: 201 CHURCH WAY Address: City-St-Zip: LABELLE, FL 33935 US City-St-Zip: Title: () Delete Title: () Change () Addition SHERROD, CAREY MRS. Name: Name: 1075 HERITAGE RD. Address: Address: City-St-Zip: FELDA, FL 33930 US City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: SANTIAGO, EFRAIN MR. Name: PENA, RICARDO I MR. 4047 OAKHAVEN DRIVE 4970 SEMINOLE AVENUE, SW. Address: Address: City-St-Zip: LABELLE, FL 33935 US City-St-Zip: LABELLE, FL 33935 US Title: () Delete Title: () Change () Addition ALEXANDER, AARON MR. Name: Name: 4785 CRESCENT AVE. SW Address: Address: City-St-Zip: LABELLE, FL 33935 US City-St-Zip: Title: () Delete Title: () Change () Addition RODRIGUEZ, JORGE D MR. Name: Name: Address: 726 CALOOSA ESTATES DRIVE Address: LABELLE, FL 33935 US City-St-Zip: 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: JORGE D. RODRIGUEZ PD 01/17/2008