

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41477

FILED
Mar 14, 2011
Secretary of State

Entity Name: LIFE CHRISTIAN CENTER, INC.

Current Principal Place of Business:

1532 CHATEAUX DE VILLE COURT
CLEARWATER, FL 33764 US

New Principal Place of Business:

Current Mailing Address:

1532 CHATEAUX DE VILLE COURT
CLEARWATER, FL 33764 US

New Mailing Address:

FEI Number: 59-3047186

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARNER, CHRIS
360 STRATHMORE AVE
OLDSMAR, FL 34677 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
Name: SCAGLIONE, DENISE
Address: 1532 CHATEAUX DE VILLE CT
City-St-Zip: CLEARWATER, FL 33764

Title: DV
Name: WARNER, CHRIS
Address: 360 STRATHMORE AVE
City-St-Zip: OLDSMAR, FL 34677

Title: DT
Name: SCAGLIONE, JOSEPH E
Address: 1532 CHATEAUX DEVILLE CT
City-St-Zip: CLEARWATER, FL 33764

Title: S
Name: WARNER, HELENE
Address: 360 STRATHMORE AVE
City-St-Zip: OLDSMAR, FL 34677

Title: C
Name: JACOBS, VICKI
Address: 9847 SAGO PT DR
City-St-Zip: LARGO, FL 33777

Title: D
Name: JACOBS, JOEL
Address: 9847 SAGO PT DR
City-St-Zip: LARGO, FL 33773

I hereby 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 all other like empowered.

SIGNATURE: DENISE SCAGLIONE

DP

03/14/2011

Electronic Signature of Signing Officer or Director

Date