2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2009
Secretary of State

DOCUMENT# N50508

Entity Name: LIFE CHRISTIAN SCHOOL, INC.

Current Principal Place of Business:

11596 THORNHILL PLACE
BRYCEVILLE, FL 32009 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1507
CALLAHAN, FL 32011 US

New Mailing Address:

FEI Number: 59-3137241 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CULBERTSON, BETH ANN
531 TAMIAMI TRAIL
UNIT 1
PT. CHARLOTTE, FL 33953 US

Name and Address of New Registered Agent:

NELSON, STEPHANIE M
33268 MEADOWS LANE
CALLAHAN, FL 32011 US

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: STEPHANIE M. NELSON 01/13/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PARKER, DENISE B
Address: 11596 THORNHILL PLACE
City-St-Zip: BRYCEVILLE, FL 32009

Title: D ( ) Delete
Name: FARMER, HEATHER R
Address: 613283 RIVER RD
City-St-Zip: CALLAHAN, FL 32011

Title: D ( ) Delete
Name: PARKER, LOWERY K
Address: 11596 THORNHILL PLACE
City-St-Zip: BRYCEVILLE, FL 32009

Title: D (X) Delete
Name: NELSON, STEPHANIE
Address: 33268 MEADOWS LN.
City-St-Zip: CALLAHAN, FL 32011

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: DENISE PARKER D. 01/13/2009
Electronic Signature of Signing Officer or Director Date