2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N93000002249

Entity Name: RIVER OF LIFE INTERNATIONAL OUTREACH CENTER, INC.

FILED Feb 21, 2003 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:			
14955 GUL	.F BLVD							
15A MADEIRA	BEACH, FL	337 0 8 U	JS					
Current Mailing Address:					New Mailing Address:			
14955 GUL 15A								
MADEIRA	BEACH, FL 3	33708 U	JS					
FEI Number:	59-3177532	FEI Num	ber Applied For ()	FEI Num	ber Not Appli	cable ()	Certificate of Status Desired ()
Name and	Address of	Current Re	egistered Agent:		Name and	Address o	f New Registered Agent:	
MORSINK, JACK D 14995 GULF BLVD MADEIRA BEACH, FL 33708					MORSINK, JACK D 14955 GULF BLVD MADEIRA BEACH, FL 33708			
The above in the State	named entity of Florida.	submits th	is statement for the pur	pose of	changing it	s registered	d office or registered agent, or	both,
SIGNATURE: JACK MORSINK					02/21/2003			
	Electro	nic Signatu	re of Registered Agent	***			Date	
OFFICERS AND DIRECTORS:					ADDITION	S/CHANGE	S TO OFFICERS AND DIRE	CTORS
Title: Name: Address: City-St-Zip:	DT (GHIOTTO, JEF 17602 WHISTI LUTZ, FL 335	LING LANE			Title: Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	DP (MORSINK, JAG 14995 GULF E MADEIRA BEA	BLVD	08	,	Title: Name: Address: City-St-Zip:	MORSINK, J. 14995 GULF	(X) Change () Addition ACK D PRESIDE BLVD EACH, FL 33708	
Title: Name: Address: City-St-Zip:	D (GHIOTTO, JEF 17602 WHISTI LUTZ, FL 335	LING LANE			Title: Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip: Title:	SHUMLICK, DA 14955 GULF E MADEIRA BEA	BLVD	08		Title: Name: Address: City-St-Zip:	GUNNING, D 14955 GULF MADEIRA BE	EACH, FL 33708 () Change (X) Addition	
Name: Address; City-St-Zip: Title:	() Delete		• (Name: Address: City-St-Zip: Title:	14955 GULF MADEIRA BE	KEVIN J TREASUR BLVD ACH, FL 33708 () Change (X) Addition	
Name:					Name:		IVER OF LI. FE INTERNATION A L	OUTRE

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

Address:

City-St-Zip:

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.

Electronic Signature of Signing Officer or Director

Address:

City-St-Zip:

SIGNATURE: JACK MORSINK

02/21/2003

14955 GULF BLVD 15A

DP

MADEIRA BEACH, FL 33708

Date