

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morinham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**SECRETARY OF STATE**  
**DIVISION OF CORPORATIONS**

95 JAN 26 PM 3:42

**DOCUMENT # N94000004857 (8)**

1. Corporation Name

**LORD JESUS CHRIST CENTER, INC.**

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1300 S. AIRPORT BLVD. #151 MELBOURNE FL 32901	1300 S. AIRPORT BLVD. #151 MELBOURNE FL 32901

3. Date Incorporated or Qualified <b>09/28/1994</b>	3a. Date of Last Report <b>FIRST</b>
4. FEI Number <b>59-3275166</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address		
21. <b>SAME</b>	26. <b>SAME</b>		
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.		
23. City & State	28. City & State		
24. Zip	25. Country	29. Zip	30. Country

9. Name and Address of Current Registered Agent

**STARR, KEN**  
**1300 SOUTH AIRPORT BLVD. #151**  
**MELBOURNE FL 32901**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS	
TITLE	<b>D</b>
NAME	<b>STARR, KEN</b>
STREET ADDRESS	<b>1300 S. AIRPORT BLVD. #151</b>
CITY-ST-ZIP	<b>MELBOURNE FL 32901</b>
TITLE	<b>D</b>
NAME	<b>VANLANDINGHAM, JIM</b>
STREET ADDRESS	<b>513 TURTLE CIRCLE</b>
CITY-ST-ZIP	<b>SATELLITE BEACH FL 32937</b>
TITLE	<b>D</b>
NAME	<b>VANLANDINGHAM, GWEN</b>
STREET ADDRESS	<b>513 TURTLE CIRCLE</b>
CITY-ST-ZIP	<b>SATELLITE BEACH FL 32937</b>
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ken Starr **KEN STARR** PRESIDENT 1-19-95 725-2218  
Signature and typed or printed name of signing officer or director Date (Month/Day/Year)