

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000881

FILED
May 06, 2009
Secretary of State

Entity Name: LIVING FAITH CHRISTIAN CENTER, INC.

Current Principal Place of Business:

1492 OAKMONT
NICEVILLE, FL 32578

New Principal Place of Business:

Current Mailing Address:

PO BOX 5074-BWB
NICEVILLE, FL 32578 US

New Mailing Address:

FEI Number: 59-3260812 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BUESINGER, RICHARD L
1492 OAKMONT PL
NICEVILLE, FL 32578 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: P/D () Delete
Name: BUESINGER, RICHARD L
Address: 1492 OAKMONT PL
City-St-Zip: NICEVILLE, FL 32578

Title: V/D () Delete
Name: BUESINGER, DAVID E
Address: 12 TRA-LIN RIDGE
City-St-Zip: ALTON, IL 62002

Title: S/D () Delete
Name: LAPOINTE, TANIA M
Address: 327 OHIO AVENUE
City-St-Zip: VALPARAISO, FL 32580

Title: T () Delete
Name: BROWN, JERRY D
Address: 112 MARGEAUX DRIVE
City-St-Zip: MAUMELLE, AR 72113

Title: T () Delete
Name: BUESINGER, DARLENE J
Address: 1492 OAKMONT PL
City-St-Zip: NICEVILLE, FL 32578

Title: T () Delete
Name: BUESINGER, RICHARD L JR
Address: 8331 CHADBURN CROSSING
City-St-Zip: MONTGOMERY, AL 36116

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
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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: RICHARD L BUESINGER

P/D

05/06/2009

Electronic Signature of Signing Officer or Director

Date