

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006 8:00 am
Secretary of State

04-12-2006 90075 041 ****70.00

DOCUMENT # N95000001808 1. Entity Name TRUE LIFE WORSHIP CENTER, INC.			
Principal Place of Business 113 SUNDANCE CT WINTER SPRINGS, FL 32708 US		Mailing Address 113 SUNDANCE CT WINTER SPRINGS, FL 32708 US	
2. Principal Place of Business 672 Peppergrass Run Suite, Apt. #, etc. Royal Palm Beach City & State FL Zip 33411 Country Palm Beach		3. Mailing Address 672 Peppergrass Run Suite, Apt. #, etc. Royal Palm Beach City & State FL Zip 33411 Country Palm Beach	
4. FEI Number 59-3316776		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WILLIAMSON, ROBERT A 113 SUNDANCE CT WINTER SPRINGS, FL 32708		7. Name and Address of New Registered Agent Name Williamson, Robert A Street Address (P.O. Box Number is Not Acceptable) 672 Peppergrass Run City Royal Palm Beach FL Zip Code 33411	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD WILLIAMSON, ROBERT A 113 SUNDANCE COURT WINTER SPRINGS, FL 32708	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD Williamson, Robert A 672 Peppergrass Run Royal Palm Beach, FL 33411
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD WILLIAMSON, YVONNE 113 SUNDANCE CT WINTER SPRINGS, FL 32708	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD Williamson, Yvonne 672 Peppergrass Run Royal Palm Beach, FL 33411
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD BLACK HELEN 2540 CITRUS CLUBLANE BOX 34 ORLANDO, FL	TITLE NAME STREET ADDRESS CITY - ST - ZIP	(Empty)
TITLE NAME STREET ADDRESS CITY - ST - ZIP	(Empty)	TITLE NAME STREET ADDRESS CITY - ST - ZIP	(Empty)
TITLE NAME STREET ADDRESS CITY - ST - ZIP	(Empty)	TITLE NAME STREET ADDRESS CITY - ST - ZIP	(Empty)
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like-empowered.			
SIGNATURE: <i>Yvonne Williamson</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 4/10/06 Daytime Phone # 561-784-0139	