

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90100 045 ****61.25

DOCUMENT # N95000001992

1. Entity Name

THE WAY THE TRUTH THE LIFE FOUNDATION INC.



Principal Place of Business

1511 E DIANA ST
TAMPA FL 33610
US

Mailing Address

1511 E DIANA ST
TAMPA FL 33610
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3380621

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

OVERTON, PETER O
1511 E DIANA ST
TAMPA FL 33610

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-stating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME OVERTON, PETER
STREET ADDRESS 1511 E DIANA ST
CITY-ST-ZIP TAMPA FL 33610

TITLE VD ☐ Delete
NAME OVERTON, BEATRICE
STREET ADDRESS 1511 E DIANA ST
CITY-ST-ZIP TAMPA FL 33610

TITLE VD ☐ Delete
NAME OVERTON, JOHN
STREET ADDRESS 3028 GROSS AVE.
CITY-ST-ZIP WAKE FOREST NC 27587

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Change ☐ Addition
NAME OVERTON Peter
STREET ADDRESS 1511 E DIANA STREET
CITY-ST-ZIP TAMPA FL 33610

TITLE VD ☐ Change ☐ Addition
NAME OVERTON BEATRICE
STREET ADDRESS 1511 E DIANA STREET
CITY-ST-ZIP TAMPA FL 33610

TITLE VD ☐ Change ☐ Addition
NAME OVERTON JOHN
STREET ADDRESS 3028 GROSS AVE
CITY-ST-ZIP WAKE FOREST NC 27587

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Dr. Peter Overton (Peter Overton) 2/27/06 813-238-0201