


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Sep 06, 2005 8:00 am
Secretary of State

09-06-2005 90133 007 ****61.25

DOCUMENT # N95000002354	
1. Entity Name LIFE CHANGING MINISTRIES / UNITED CHURCH IN CHRIST INC.	

Principal Place of Business 715 CORNELIA AVENUE LAKELAND FL 33815 US	Mailing Address P.O BOX 91123 LAKELAND FL 33804 US
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2. Principal Place of Business 715 Cornelia Ave.	3. Mailing Address P.O. Box 91123
Suite, Apt. #, etc.	Suite, Apt. #, etc.

2nd MOORE CR2E037 (5/05)

City & State Lakeland FL	City & State Lakeland FL
Zip 33815	Zip 33804
Country Polk	Country Polk

4. FEI Number 59-3314863	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ANDREWS, BISHOP WILBERT 7805 US. HWY 98N 47-C LAKELAND FL 33809	7. Name and Address of New Registered Agent Name Bishop Wilbert A. Andrews Street Address (P.O. Box Number is Not Acceptable) 1222 W. 8th Street City Lakeland FL Zip Code 33805
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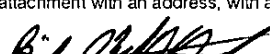
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  DATE **8/30/2005**
(NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25 Due By September 7, 2005	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
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10. CD OFFICERS AND DIRECTORS		11. CD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ANDREWS, WILBERT A 7805 US HWY 98N #47-C LAKELAND FL 33809 D <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD Andrews, Bishop Wilbert A. 1222 W. 8th Street Lakeland, FL 33805 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WILLIAMS, FAUSTINA M 7805 US HWY 98 N, #47C LAKELAND FL 33809 D <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Andrews Faustina M. 1222 W. 8th Street Lakeland, FL 33805 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WILLIAMS, ANGELINA D 7805 US HWY 98 N #47C LAKELAND FL 33809 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Williams, Angelica D 1222 W. 8th Street Lakeland, FL 33805 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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  **Chairman/Director** DATE **8/30/2005** (813) 802-4536