2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2006
Secretary of State

DOCUMENT# N95000003165

Entity Name: WORD OF LIFE CHRISTIAN CENTER, INC.

Current Principal Place of Business:

1555 W. MAIN ST
BARTOW, FL 33830 US

New Principal Place of Business:

Current Mailing Address:

1555 W. MAIN ST
BARTOW, FL 33830 US

New Mailing Address:

FEI Number: 59-3324164 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WHITE, GARY D
3935 PELICAN COURT
LAKELAND, FL 33813 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:	PD	( ) Delete
Name:	WHITE, GARY D	
Address:	C/O 3935 PELICAN COURT	
City-St-Zip:	LAKELAND, FL 33813	
Title:	VPD	( ) Delete
Name:	WHITE, DEBORAH A	
Address:	C/O 3935 PELICAN COURT	
City-St-Zip:	LAKELAND, FL 33813	
Title:	ST	( ) Delete
Name:	KISTNER, DEBORAH J	
Address:	124 FERN RD S.	
City-St-Zip:	LAKELAND, FL 33813	
Title:	D	( ) Delete
Name:	SHULL, JUDITH N	
Address:	PO BOX 2469	
City-St-Zip:	WINTER HAVEN, FL 33883	

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
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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: DEBBIE KISTNER T 04/11/2006

Electronic Signature of Signing Officer or Director — Date