

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003632

FILED  
Jan 08, 2005  
Secretary of State

**Entity Name:** THE GRAND ISLAND FREE METHODIST LIGHT AND LIFE CHAPEL, INC.

**Current Principal Place of Business:**

35720 GOOSE CREEK RD  
LEESBURG, FL 34788

**New Principal Place of Business:**

**Current Mailing Address:**

35720 GOOSE CREEK RD  
LEESBURG, FL 34788

**New Mailing Address:**

**FEI Number:** 59-6571994

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JACKSON, BILL  
11841 S SHELLEY DRIVE  
LEESBURG, FL 34788 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: D ( ) Delete  
Name: STEDDOM, CATHERINE  
Address: 211 FERN CT  
City-St-Zip: LEESBURG, FL 34748

Title: CDT ( ) Delete  
Name: JACKSON, WILLIAM A  
Address: 11841 S. SHELLEY DRIVE  
City-St-Zip: LEESBURG, FL 34788

Title: T ( ) Delete  
Name: SMITH, MATTHEW C  
Address: 35720 GOOSE CREEK RD  
City-St-Zip: LEESBURG, FL 34788

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: SMITH, PHILIP T  
Address: 35720 GOOSE CREEK RD.  
City-St-Zip: LEESBURG, FL 34788

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 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 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: PHILIP T. SMITH

D

01/08/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date