

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004059

Entity Name: LIFE-N-FAITH MINISTRIES, INC.

FILED  
Apr 27, 2004  
Secretary of State

**Current Principal Place of Business:**

PO BOX 48335  
TAMPA, FL 33647

**New Principal Place of Business:**

PO BOX 6777  
SPRING HILL, FL 33611

**Current Mailing Address:**

PO BOX 48335  
TAMPA, FL 33647

**New Mailing Address:**

PO BOX 6777  
SPRING HILL, FL 33611

FEI Number: 59-3346638

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JOHNSON, KEITH  
8201 SUDBURY DR  
PORT RICHEY, FL 34668 US

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

JOHNSON, KEITH  
7504 OAK TREE LANE  
SPRING HILL, FL 34607 US

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: KEITH JOHNSON

04/27/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: JOHNSON, KEITH  
Address: 8201 SUDBURY DR  
City-St-Zip: PORT RICHEY, FL 34668

Title: VPD ( ) Delete  
Name: RALEY, CHARLES W  
Address: 304 DORA DRIVE  
City-St-Zip: ORANGE PARK, FL 32073

Title: DST ( ) Delete  
Name: JOHNSON, BONNIE K  
Address: 17565 FAIRMEADOW DRIVE  
City-St-Zip: TAMPA, FL 33647

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

Title: PD (X) Change ( ) Addition  
Name: JOHNSON, KEITH  
Address: 7504 OAK TREE LANE  
City-St-Zip: SPRING HILL, FL 34607

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: KEITH JOHNSON

PRES

04/27/2004

Electronic Signature of Signing Officer or Director

Date