2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000006708

Entity Name: WAY OF LIFE COMMUNITY CHURCH, INC.

FILED Jan 22, 2003 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
118 LYNDHURST DR LONGWOOD, FL 32779						
Current Mailing Address:			New Maili	New Mailing Address:		
118 LYNDHURST DR LONGWOOD, FL 32779						
FEI Number:	59-3412509	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
118 LYNDHÚRST DR				LANDSMAN, MICHAEL A 522 HUNT CLUB BLVD # 116 APOPKA, FL 32703 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: MICHAEL ANDREW LANDSMAN					01/22/2003	
	Electronic	Signature of Registered Agent	İ		Date	
OFFICERS AND DIRECTORS: ADDIT				S/CHANGES	TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () D LANDSMAN, MICH 118 LYNDHURST LONGWOOD, FL	HAEL DR	Title: Name: Address: City-St-Zip:	P (X LANDSMAN, M 522 HUNT CLU APOPKA, FL 3	JB BLVD # 116	
Title: Name: Address: City-St-Zip:	V () D WORLEY, JOHN 44 FARMERS RO GROTUN, MA 01	W	Title: Name: Address: City-St-Zip:	V (X LANDSMAN, M 522 HUNTCLU APOPKA, FL 3	B BLVD # 116	
Title: Name: Address: City-St-Zip:	ST () D LANDSMAN, MAR 118 LYNDHURST LONGWOOD, FL	THA DR	Title: Name: Address: City-St-Zip:	ST (X LANDSMAN, M 522 HUNT CLU APOPKS, FL	JB BLVD	
Title: Name: Address: City-St-Zip:	D () D BANKSON, DOUG 585 E. SANDPIPE APOPKA, FL 327	BLAS ER	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	D () D KERN, ED 3226 CHADWICK APOPKA, FL 327	RD	Title: Name: Address: City-St-Zip:	() Change()Addition	

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: MICHAEL LANDSMAN P 01/22/2003