

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001208

FILED  
Apr 21, 2006  
Secretary of State

Entity Name: LIGHT SOURCE MINISTRIES, INC.

## Current Principal Place of Business:

690-B E RHODE ISLAND AVENUE  
ORANGE CITY, FL 32763

## New Principal Place of Business:

## Current Mailing Address:

690-B E RHODE ISLAND AVENUE  
ORANGE CITY, FL 32763

## New Mailing Address:

FEI Number: 59-3500489

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COKER, CHARLES L JR.  
690-B E RHODE ISLAND AVENUE  
ORANGE CITY, FL 32763 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: COKER, CHARLES L JR.  
Address: 858 WHITEWOOD DR  
City-St-Zip: DELTONA, FL 32725

Title: VPD ( ) Delete  
Name: WARNER, DANIEL  
Address: 54 S. LACY CIRCLE  
City-St-Zip: DELTONA, FL 32725

Title: TD ( ) Delete  
Name: BOGGS, GREG  
Address: 968 PADDINGTON TERRACE  
City-St-Zip: LAKE MARY, FL 32746

Title: SD ( ) Delete  
Name: WARNER, CINDEE  
Address: 54 S. LACY CIRCLE  
City-St-Zip: DELTONA, FL 32725

Title: D ( ) Delete  
Name: TABER, GERALD  
Address: 2420 24TH LANE  
City-St-Zip: GREENACRES, FL 33463

Title: D ( ) Delete  
Name: VANAUKER, ROGER  
Address: 734 BRIARCLIFF DRIVE  
City-St-Zip: ORANGE CITY, FL 32763

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: COKER, CHARLES L JR.  
Address: 1265 BRAMLEY LANE  
City-St-Zip: DELAND, FL 32720

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:

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: CHARLES L. COKER JR.

PD

04/21/2006

Electronic Signature of Signing Officer or Director

Date