## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000005557

FILED Apr 02, 2008 Secretary of State

Entity Name: HEALING TREE OF LIFE CHURCH, INC.

**Current Principal Place of Business: New Principal Place of Business:** 603 BALFOUR DRIVE WINTER PARK, FL 32792 **Current Mailing Address: New Mailing Address:** 603 BALFOUR DRIVE WINTER PARK, FL 32792 FEI Number: 59-3537279 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JOHNSTON, TEDDY (TED) 603 BALFOÚR DRIVE WINTER PARK, FL 32792 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition JOHNSTON, TEDDY (TED) Name: Name: 603 BALFOUR DRIVE Address: Address: City-St-Zip: WINTER PARK, FL 32792 City-St-Zip: Title: () Delete Title: () Change () Addition Name: BAUM, DEBRA Name: Address: 512 SPRING CLUB DRIVE Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: Title: () Delete Title: () Change () Addition KOPATICH, PATRICIA Name: Name: 707 BROOK FOREST COURT Address: Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: CIACCIO, TERESA Name: Address: 320 KAYLA DRIVE Address: City-St-Zip: NATCHITOCHES, LA 71457 City-St-Zip: Title: () Delete Title: () Change () Addition WILLIAMS, SUSAN J Name: Name: 1007 HANGING VINE POINT Address: Address: City-St-Zip: LONGWOOD, FL 32750 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: TED JOHNSTON PRES 04/02/2008