

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002129

FILED  
Apr 03, 2009  
Secretary of State

Entity Name: LIFE ETERNAL MINISTRIES C.O.G.I.C., INC.

## Current Principal Place of Business:

7901 BUCK LAKE ROAD  
TALLAHASSEE, FL 32317

## New Principal Place of Business:

## Current Mailing Address:

POST OFFICE BOX 13702  
TALLAHASSEE, FL 32317

## New Mailing Address:

FEI Number: 59-3568793

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RICHARDSON, KENNETH  
1049 WINFIELD FOREST DR.  
TALLAHASSEE, FL 32311 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: RICHARDSON, KEN  
Address: 1049 WINFIELD FOREST DR.  
City-St-Zip: TALLAHASSEE, FL 32317

Title: VT ( ) Delete  
Name: RICHARDSON, PERNELLA  
Address: 1049 WINFIELD FOREST DR.  
City-St-Zip: TALLAHASSEE, FL 32317

Title: LM ( ) Delete  
Name: FRAZIER, DERRECK  
Address: 7901 BUCK LAKE ROAD  
City-St-Zip: TALLAHASSEE, FL 32317

Title: S ( ) Delete  
Name: THOMAS, CALVIN  
Address: 7901 BUCK LAKE ROAD  
City-St-Zip: TALLAHASSEE, FL 32317

Title: T (X) Delete  
Name: ROUNDTREE, SAMANTHA  
Address: 7901 BUCK LAKE ROAD  
City-St-Zip: TALLAHASSEE, FL 32317

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: LM (X) Change ( ) Addition  
Name: MARTIN, CARLA  
Address: 7901 BUCK LAKE ROAD  
City-St-Zip: TALLAHASSEE, FL 32317

Title: T (X) Change ( ) Addition  
Name: ROUNDTREE, SAMANTHA  
Address: 7901 BUCK LAKE ROAD  
City-St-Zip: TALLAHASSEE, FL 32317

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: PERNELLA RICHARDSON

VT

04/03/2009

Electronic Signature of Signing Officer or Director

Date