

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005434

FILED
Apr 09, 2009
Secretary of State

Entity Name: LIFELINE COMMUNITY CHURCH INC. OF CENTRAL FLORIDA

Current Principal Place of Business:

15096 NW 25A
REDDICK, FL 32686

New Principal Place of Business:

Current Mailing Address:

P O BOX 100
REDDICK, FL 32686

New Mailing Address:

FEI Number: 59-3748404

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COLLINS, WENDELL DEC
501 W HWY 318
CITRA, FL 32113 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: P () Delete
Name: MCKINON, JAMES L
Address: 16047 N.W. 37TH TERRACE P O BOX 87
City-St-Zip: REDDICK, FL 32686

Title: T () Delete
Name: COLLINS, WENDELL
Address: 501 W HWY 318
City-St-Zip: CITRA, FL 32113

Title: S () Delete
Name: MCKINON, JUANITA D
Address: 16047 N.W. 37TH TERRACE, P O BOX 87
City-St-Zip: REDDICK, FL 32686

Title: TCP () Delete
Name: JACKSON, RUSA F
Address: 620 N.W. 35TH STREET
City-St-Zip: OCALA, FL 34475

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: JAMES L. MCKINON

P

04/09/2009

Electronic Signature of Signing Officer or Director

Date