

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000054021

FILED
Aug 01, 2005
Secretary of State

Entity Name: SONLIGHT CHRISTIAN FAMILY RESOURCE CENTER, INC.

Current Principal Place of Business:

1041 E. JOHN SIMS PKWY.
NICEVILLE, FL 32578

New Principal Place of Business:

Current Mailing Address:

1041 E. JOHN SIMS PKWY.
NICEVILLE, FL 32578

New Mailing Address:

FEI Number: 59-3323582

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AXELSON, MICHELE
1041 JOHN SMITH PKWY
NICEVILLE, FL 32578 US

Name and Address of New Registered Agent:

LIVINGSTON, MELVIN D JR.
1041 JOHN SMITH PKWY
NICEVILLE, FL 32578 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: MELVIN D. LIVINGSTON, JR.

08/01/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: AXELSON, MICHELE
Address: 105 TERESA COURT
City-St-Zip: NICEVILLE, FL 32578

Title: D () Delete
Name: AXELSON, JAMES
Address: 105 TERESA COURT
City-St-Zip: NICEVILLE, FL 32578

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LIVINGSTON, MELVIN D JR.
Address: 215 YACHT CLUB DR.
City-St-Zip: NICEVILLE, FL 32578

Title: VP (X) Change () Addition
Name: LIVINGSTON, CHRISHTINA L
Address: 215 YACHT CLUB DR
City-St-Zip: NICEVILLE, FL 32578

Title: S/T () Change (X) Addition
Name: BOON, DAWN R
Address: 929 LINDEN AVE
City-St-Zip: NICEVILLE, FL 32578

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTINA L LIVINGSTON

VP

08/01/2005

Electronic Signature of Signing Officer or Director

Date