

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2001 8:00 am
Secretary of State

02-01-2001 90144 050 ****61.25

DOCUMENT # N45898

1. Entity Name

LIFELINE MINISTRIES INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

600 E NEW HAVEN
 MELBOURNE FL 32901
 US

BOX 2554
 MELBOURNE FL 32902-2554

2. Principal Place of Business

3. Mailing Address

16 King Haigler Chase
 Suite, Apt. #, etc.

16 King Haigler Chase
 Suite, Apt. #, etc.

City & State

City & State

Lake Wylie SC

Lake Wylie SC

Zip

Country

Zip

Country

29710

USA

29710

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MC CAMMON, GEORGE W
 2260 S. FRONT STREET #206
 MELBOURNE FL 32901

Name Rutledge, Penne J.
 Street Address (P.O. Box Number is Not Acceptable) 804 Pine Ridge Rd
 City Sanford FL Zip Code 32773

8. 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 * Penne J. Rutledge
 Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1/25/01
 DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	VPD	☒ Delete
NAME	WARWICK, PAULA	
STREET ADDRESS	4061 MALLARD DR.	
CITY-ST-ZIP	MELBOURNE FL 32934	
TITLE	TD	☒ Delete
NAME	COOK, SHAN	
STREET ADDRESS	973 WISPEROAK DR	
CITY-ST-ZIP	MELBOURNE FL 32901	
TITLE	D	☒ Delete
NAME	SHIPLEY, SHERRY	
STREET ADDRESS	8080 142ND ST	
CITY-ST-ZIP	SEBASTIAN FL 32958	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VPD	☒ Change ☒ Addition
NAME	Rutledge, Penne J.	
STREET ADDRESS	804 Pine Ridge Rd.	
CITY-ST-ZIP	Sanford FL 32773	
TITLE	P (President)	☐ Change ☒ Addition
NAME	George W. McCammon	
STREET ADDRESS	16 King Haigler Chase	
CITY-ST-ZIP	Lake Wylie SC 29710	
TITLE	S	☐ Change ☒ Addition
NAME	Mary A. McCammon	
STREET ADDRESS	16 King Haigler Chase	
CITY-ST-ZIP	Lake Wylie SC 29710	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

George W. McCammon 1/20/01 803 831 1821
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)