



Secretary of State  
 Corporation Division  
 255 Capitol Street NE, Suite 151  
 Salem, OR 97310-1327

Phone: (503)986-2200  
 www.filinginoregon.com

**2017 ANNUAL REPORT**  
**Registry Number: 110915691**  
**Date of Incorporation: 04/30/2015**  
**Fee: \$50**  
**Due Date: 04/30/2017**  
**Type: DOMESTIC NONPROFIT CORPORATION**

LIFE APPRECIATION MISSION  
 PO BOX 66564  
 PORTLAND OR 97290

**FILED**

**APR 12 2017**

OREGON  
 SECRETARY OF STATE

**Name of Domestic Nonprofit Corporation**  
 LIFE APPRECIATION MISSION

**Jurisdiction:** OREGON

**Non Profit:** Religious

The following information is required by statute. Please complete the entire form. Failure to submit this Annual Report and fee by the due date may result in inactivation on our records.

**Registered Agent**

SOUTH BEACH MISSIONS  
 15113 S MAPLE LANE RD  
 OREGON CITY OR 97045

If the Registered Agent has changed,  
 the new agent has consented to the appointment.  
 Oregon street address required.

**1) Type of Business**

**2) Principal Place of Business (Address, city, state, zip)**

6889 GLENLAKE PARKWAY  
 SANDY SPRINGS GA 30328

**3) Mailing Address (Address, city, state, zip)**

PO BOX 66564  
 PORTLAND OR 97290

**4) President (Name & Address)**

JEREMY LEE  
 PO BOX 66564  
 PORTLAND OR 97290

**5) Secretary (Name & Address)**

SHERMAN TURNER  
 PO BOX 66564  
 PORTLAND OR 97290

**6) Signature**

*Jeremy Lee*

**8) Date**

4/19/16

**7) Printed Name**

Jeremy Lee

**9) Daytime Phone Number**

503-307-1608

**Make check payable to "Corporation Division" and mail completed form with payment to the address above.**

Note: Filing fees may be paid with a major credit card.  
 Submit the card number and expiration date on a separate page for your protection.

ANRPF1-  
 04/05/17

LIFE APPRECIATION MISSION



110915691-17871428

RENANA