

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **723434** (7)

1. Corporation Name

LIVING WATERS CHRISTIAN FELLOWSHIP INC. OF FERNANDINA BEACH FLORIDA



Principal Place of Business: 134 OLD CHURCH ST, FERNANDINA BEACH FL 32034, US
Mailing Address: CH. FLORIDA, 134 OLD CHURCH ST, FERNANDINA BEACH FL 32034

3. Date Incorporated or Qualified: 05/17/1972
3a. Date of Last Report: 04/12/1995

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, City & State, Zip, and Country.

4. FEI Number: 59-1819683
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: MERTZ, REBECCA, 1635 ELLIS LANDING RD, FERNANDINA BEACH FL 32034

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, State (FL), and Zip Code.

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: REBECCA MERTZ (typed) *Rebecca Mertz* (handwritten) 4/1/96 (Date)

12. OFFICERS AND DIRECTORS

TITLE	VD	<input type="checkbox"/> DELETE
NAME	GOYETTE, ROBERT	
STREET ADDRESS	ROSES BLUFF RD	
CITY-ST-ZIP	FERN BCH. FL	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	TEASTER, M.W.	
STREET ADDRESS	RT. 2, BOX 243-C	
CITY-ST-ZIP	YULEE FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MERTZ, REBECCA	
STREET ADDRESS	1635 ELLIS LANDING RD	
CITY-ST-ZIP	FERNANDINA BEACH FL 32034	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	HALL, THOMAS G.	
STREET ADDRESS	ROSES BLUFF RD	
CITY-ST-ZIP	YULEE FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	MYER, ERIC	
STREET ADDRESS	ROSES BLUFF ROAD	
CITY-ST-ZIP	YULEE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ERIC MYER (typed) *[Signature]* (handwritten) 4/1/96 (Date) (904) 277-0777 (Daytime Phone #)

CR2E037 (12/95)