FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

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

APPROVED AND FILED

98 JAN 16 AM 8:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 734513 (5)

1. Corporation Name

THE CHURCH OF THE LIVING GOD, INC.

Principal Place of Business	Mailing Address
6630 CAROLINE ST MILTON FL 32570	6630 CAROLINE ST MILTON FL 32570

3. Date Incorporated or Qualified: 12/04/1975

4. FEI Number: 59-6586646 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business	21	2a. Mailing Address	26
Suite, Apt. #, etc.	22	Suite, Apt. #, etc.	27
City & State	23	City & State	28
Zip / Country	24 / 25	Zip / Country	29 / 30

9. Name and Address of Current Registered Agent

CULPEPPER, KATIE
3140 ROBINSON PT ROAD
MILTON FL 32583

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TDS	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	TURNER, LISA CULPEPPER		1.2 NAME	
STREET ADDRESS	ROBINSON PT RD		1.3 STREET ADDRESS	
CITY-ST-ZIP	MILTON, FL 00000		1.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	GOLDEN, JEWELL		2.2 NAME	
STREET ADDRESS	GARCON PT RD		2.3 STREET ADDRESS	
CITY-ST-ZIP	MILTON, FL 00000		2.4 CITY-ST-ZIP	
TITLE	VD	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	CULPEPPER, DW		3.2 NAME	
STREET ADDRESS	GARCON PT RD		3.3 STREET ADDRESS	
CITY-ST-ZIP	MILTON, FL 00000		3.4 CITY-ST-ZIP	
TITLE	PD	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	CULPEPPER, KATIE		4.2 NAME	
STREET ADDRESS	ROBINSON PT RD		4.3 STREET ADDRESS	
CITY-ST-ZIP	MILTON, FL 00000		4.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	GOLDEN, ALBERT		5.2 NAME	
STREET ADDRESS	GARCON PT., RD.		5.3 STREET ADDRESS	
CITY-ST-ZIP	MILTON FL		5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

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A. Alan
Jan. 16, 1998

14. 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 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.

CR2E037 (10/97)