

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13007

FILED  
Jul 29, 2007  
Secretary of State

**Entity Name:** LIVING FAITH CHRISTIAN CENTER CHURCH, INC.

**Current Principal Place of Business:**

438 WEST 67TH ST.  
JACKSONVILLE, FL 32208 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 372  
CALLAHAN, FL 32011 US

**New Mailing Address:**

**FEI Number:** 59-3029449 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

LIVING FAITH CHRISTIAN CHURCH  
55330 YELLOW JACKET DR.  
CALLAHAN, FL 32011 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: MATHIS, DAVID J  
Address: 55330 YELLOW JACKET DRIVE  
City-St-Zip: CALLAHAN, FL 32011 US

Title: VICP ( ) Delete  
Name: MATHIS, SADIE MAE (M, RS.)  
Address: 55330 YELLOW JACKET DR.  
City-St-Zip: CALLAHAN, FL 32011 US

Title: DIRE ( ) Delete  
Name: MATHIS, TALENA R.,  
Address: 55330 YELLOW JACKET DRIVE  
City-St-Zip: CALLAHAN, FL 32011 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID MATHIS

PRES

07/29/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date