

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N27389

1. Entity Name

LIVING WORD INTERNATIONAL, INC.

FILED
Jun 09, 2000 8:00 am
Secretary of State

06-09-2000 90010 019 ****61.25

Principal Place of Business

Mailing Address

7255 SOUTH MILITARY TRAIL
 LAKE WORTH FL 33463

7255 SOUTH MILITARY TRAIL
 LAKE WORTH FL 33463-7810

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WATSON, MIKE
 398 W CAMINO GARDENS BLVD #206
 BOCA RATON FL 33432

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEF 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DP	☐ Delete
NAME	VAUGHN, GERALD W., II	
STREET ADDRESS	7255 S. MILITARY TR	
CITY-ST-ZIP	LAKE WORTH FL 33436	
TITLE	DV	☒ Delete
NAME	PETERS, TOM C.	
STREET ADDRESS	4117 ALPINA CT, N	
CITY-ST-ZIP	BOYNTON BEACH FL 33436	
TITLE	DVS	☐ Delete
NAME	BRIGGS, DAVID	
STREET ADDRESS	1835 CARANDIS RD	
CITY-ST-ZIP	WEST PALM BEACH FL 33416	
TITLE	ST	☐ Delete
NAME	VAUGHN, TERESA	
STREET ADDRESS	7255 S. MILITARY TRAIL	
CITY-ST-ZIP	LAKE WORTH FL 33436	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	DS	☐ Change ☒ Addition
NAME	LARSEN, CARL L.	
STREET ADDRESS	14511 STIERUP LAVE	
CITY-ST-ZIP	WELLINGTON FL 33414	
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: *Gerald W. Vaughn*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-21-2000

Date

561-369-8181

Daytime Phone #

CR2E037 (9/99)