


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90304 045 ****61.25

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DOCUMENT # N9600000205					
1. Entity Name LIVING WATERS ASSEMBLY OF GOD, INC.					
Principal Place of Business 1580 BLUFF ROAD APALACHICOLA, FL		Mailing Address 1580 BLUFF ROAD APALACHICOLA, FL			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3340068 Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BELL, NEIL A 1532 LINDEN ROAD APALACHICOLA, FL 32320			Name <u>Lois E. Long</u> Street Address (P.O. Box Number is Not Acceptable) <u>1532 Linden Road</u> City <u>APALACHICOLA</u> FL Zip Code <u>32320</u>		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>Lois E. Long</u> Signature, typed or printed name of registered agent and title if applicable.		<u>President</u> <u>Lois E. Long</u> (NOTE: Registered Agent signature required when reinstating)		<u>4-18-05</u> DATE	
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	DT	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NEWELL, JAMES ALFRED		NAME	Varnes, J.C.	
STREET ADDRESS	356 BROWNSVILLE ROAD		STREET ADDRESS	25 Bay View Drive	
CITY-ST-ZIP	APALACHICOLA, FL 32329		CITY-ST-ZIP	APalachicola, Fl. 32320	
TITLE	DTR	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GANDER, JIMMY		NAME	DAVIS, Ronald	
STREET ADDRESS	1493 BLUFF ROAD		STREET ADDRESS	274 24th Street	
CITY-ST-ZIP	APALACHICOLA, FL 32320		CITY-ST-ZIP	APalachicola, Fl. 32320	
TITLE	DTR	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GASKILL, THOMAS A		NAME	Andrews, Grover	
STREET ADDRESS	20 CHAPMAN ROAD		STREET ADDRESS	1066 Cypress Street	
CITY-ST-ZIP	APALACHICOLA, FL 32320		CITY-ST-ZIP	APalachicola, Fl. 32320	
TITLE	DC	<input checked="" type="checkbox"/> Delete	TITLE	PC	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BELL, NEIL A		NAME	Long, Lois E.	
STREET ADDRESS	1532 LINDEN ROAD		STREET ADDRESS	1532 Linden Road	
CITY-ST-ZIP	APALACHICOLA, FL 32320		CITY-ST-ZIP	APalachicola, Fl. 32320	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: <u>Ronald Davis</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			<u>RONNIE DAVIS</u> Date		<u>4-18-05</u> Daytime Phone # <u>8506533321</u>