

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 22, 2005 8:00 am
Secretary of State

04-22-2005 90302 049 ****70.00

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1. Entity Name

LIVING WATERS MINISTRIES INC.



Principal Place of Business

307 KNOTTY PINE CIR. C-1
LAKE WORTH FL 33463

Mailing Address

307 KNOTTY PINE CIR. C-1
LAKE WORTH FL 33463

00042332



1st MOORE

CR2E037 (10/04)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

26 0098366

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCLAUGHLIN, LUZ K
307 KNOTTY PINE CIR. C-1
LAKE WORTH FL 33463

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PTD ☐ Delete
NAME MCLAUGHLIN, LUZ K
STREET ADDRESS 307 KNOTTY PINE CIR. C-1
CITY-ST-ZIP LAKE WORTH FL 33463

TITLE D ☐ Delete
NAME MCLAUGHLIN, WILLIAM S
STREET ADDRESS 146 LAMANCH AVE.
CITY-ST-ZIP ROYAL PALM BCH FL 33411

TITLE VD ☒ Delete
NAME CAMHI, YOLANDA
STREET ADDRESS 6854 FINAMORE CIR.
CITY-ST-ZIP LAKE WORTH FL 33467

TITLE SD ☐ Delete
NAME O'BRIEN-RICHEY, PATRICIA
STREET ADDRESS 7188 BURGESS DR.
CITY-ST-ZIP LAKE WORTH FL 33467

TITLE D ☐ Delete
NAME GATES, STEVEN
STREET ADDRESS 907 E. 15TH ST.
CITY-ST-ZIP JASPER IN 47564

TITLE D ☐ Delete
NAME GATES, JUDY
STREET ADDRESS 907 E. 15TH ST.
CITY-ST-ZIP JASPER IN 47564

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Michael Nicholas Director ☐ Change ☒ Addition
NAME
STREET ADDRESS 5958 Bay Hill Circle
CITY-ST-ZIP Lake Worth, FL 33467

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

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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Signature: [Signature] Date: 5/17/05 561-439-1588
Daytime Phone #