

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 732500

**Entity Name:** THE CHURCH OF THE LIVING GOD WORLD WIDE REVIVAL CENTER, INC

**FILED**  
**Feb 26, 2018**  
**Secretary of State**  
**CC0288648422**

**Current Principal Place of Business:**

2643 5TH AVE. SO.  
ST. PETERSBURG, FL 33712

**Current Mailing Address:**

2643 5TH AVE. SO.  
ST. PETERSBURG, FL 33712 US

**FEI Number: 59-2949866**

**Certificate of Status Desired: Yes**

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

BUTLER, SAMUEL JR.  
2643 5TH AVE. SO.  
ST. PETERSBURG, FL 33712 US

*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: SAMUEL BUTLER JR.**

**02/26/2018**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                     |                 |                    |
|-----------------|---------------------|-----------------|--------------------|
| Title           | P                   | Title           | VP                 |
| Name            | BUTLER, SAMUEL JR.  | Name            | BLUNT, ERIC MARTIN |
| Address         | 11 WEST LOGAN AVE   | Address         | 3272 LEXINGTON WAY |
| City-State-Zip: | SAINT PAUL MN 55118 | City-State-Zip: | AUGUSTA GA 30909   |
|                 |                     |                 |                    |
| Title           | VP                  |                 |                    |
| Name            | BUTLER, VALERIE DR. |                 |                    |
| Address         | 11-LOGAN AVE. WEST  |                 |                    |
| City-State-Zip: | ST. PAUL, MN 55118  |                 |                    |

*I hereby 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 all other like empowered.*

**SIGNATURE: SAMUEL BUTLER JR.**

**PRESIDENT**

**02/26/2018**

Electronic Signature of Signing Officer/Director Detail

Date