2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 13, 2008 8:00 am Secretary of State

DOCUMENT # 713867 1. Entity Name THE TRUE CHURCH OF THE LIVING GOD INC. OF JACKSONVILLE, FL.					05-13-2008 90010 024 ****61.25		
1405 W STA	e of Business TE ST LE, FL 32209 US	Mailing Address 1405 W STATE ST. JACKSONVILLE, FL 32209	US -		I III OF FEINE CHIR IBAL ÇIKI QUÇL QURU BURU B	3. 106 bigii girailiy (6 (18)	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite. Apt. #, etc.		Suite, Apt. #, etc.		-01172008 Chg-NP CR2E037 (12/06)			
City & Stat		City & State		4, FEI Number 59-338424	8	Applied For Not Applicable	
Zip	Country	Zip	Country .	5. Certificate of St	alus Desired	3.75 Additional e Required	
	6. Name and Address of Current	Registered Agent		7. Name and Add	ress of New Registered Age	ent	
DETÉDEO	wilebbie i op	**	Name ,				
3380 SUN	N, EDDIE L SR. NYBROOK AVE., NORTH IVILLE, FL 32254		Street Addre	Street Address (P.O. Box Number is Not Acceptable)			
	,						
			City		FL	Zip Code -	
	named entity submits this statement for tions of registered agent.	or the purpose of changing its reg	jistered office or regi	istered agent, or both, in	the State of Florida. I am fam	niliar with, and accept	
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SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Reg	gistered Agent signature rec	quired when reinstating)	DATE		
SIGNATURE	Signature, typed or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2008	and little il applicable. (NOTE: Reg 9. Election Campa Trust Fund Cont	ign Financing	\$5.00 May Be Added to Fees	Make check p. Florida Departm		
SIGNATURE	Filing Fee is \$61.25	9. Election Campa Trust Fund Cont	ign Financing	\$5.00 May Be Added to Fees	Make check p	ent of State	
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campa Trust Fund Cont	ign Financing tribution.	\$5.00 May Be Added to Fees	Make check p Florida Departm ES TO OFFICERS AND DIREC	ent of State	
10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND DIE P PETERSON, EDDIE L SR 3380 SUNNYBROOK AVE.	9. Election Campa Trust Fund Cont RECTORS	ign Financing tribution. 11. IIILE NAME STREET ADDRESS	\$5.00 May Be Added to Fees	Make check p. Florida Departm ES TO OFFICERS AND DIREC	ent of State CTORS IN 10	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND DIF P PETERSON, EDDIE L SR 3380 SUNNYBROOK AVE. JACKSONVILLE, FL 32254 V DAMIAN, BELL 11055 BACALL RD. W.	9. Election Campa Trust Fund Cont RECTORS	ign Financing tribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees	Make check p. Florida Departm ES TO OFFICERS AND DIREC	ent of State CTORS IN 10- Change Addition	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND DIF PETERSON, EDDIE L SR 3380 SUNNYBROOK AVE. JACKSONVILLE, FL 32254 V DAMIAN, BELL 11055 BACALL RD. W. JACKSONVILLE, FL 32218 S SIMMONS, GISELA J 3781 CACTUS LANE	9. Election Campa Trust Fund Cont RECTORS Delete	ign Financing tribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees ADDITIONS/CHANG	Make check p. Florida Departme ES TO OFFICERS AND DIREC	ent of State CTORS IN 10 Change Addition Change Addition Change Addition Change Addition	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND DIE P PETERSON, EDDIE L SR 3380 SUNNYBROOK AVE. JACKSONVILLE, FL 32254 V DAMIAN, BELL 11055 BACALL RD. W. JÄCKSONVILLE, FL 32218 S SIMMONS, GISELA J 3781 CACTUS LANE JACKSONVILLE, FL 32207 D SIMMONS, DEREK C 3781 CACTUS LANE	9. Election Campa Trust Fund Cont RECTORS Delete Delete Delete	ign Financing tribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP \$5.00 May Be Added to Fees ADDITIONS/CHANG	Make check p. Florida Departme	ent of State CTORS IN 10 Change Addition Change Addition Change Addition Change Addition		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Eddie Lifeten Br. EDDIE L. PETERSON Sr. 1-27-08 904-134-9077
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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