2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2005
Secretary of State

DOCUMENT# 742479

Entity Name: LIVING WATERS WORSHIP CENTER OF GREEN COVE SPRINGS, INC.

Current Principal Place of Business:

1104 IDLEWILD AVE
GREEN COVE SPRINGS, FL 32043

New Principal Place of Business:

Current Mailing Address:

PO BOX 1207
GREEN COVE SPRINGS, FL 320431207

New Mailing Address:

FEI Number: 59-2222923 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BARRIE, LEON J III
1620 RIVERS RD
GREEN COVE SPRINGS, FL 32043 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	S	( ) Delete
Name:	HUNTER, HARRY L	
Address:	1646 RIVERS RD.	
City-St-Zip:	GREEN COVE SPGS., FL 32043	
Title:	P	( ) Delete
Name:	BARRIE, LEON J III	
Address:	1620 RIVERS RD	
City-St-Zip:	GREEN COVE SPRINGS, FL 32043	
Title:	D	(X) Delete
Name:	GILLIES, JAMES	
Address:	710 HIGHWAY AVENUE	
City-St-Zip:	GREEN COVE SPGS, FL 32043	
Title:	DCT	( ) Delete
Name:	GILLIES, DEBRA T	
Address:	3949 WISEMAN RD	
City-St-Zip:	GREEN COVE SPRINGS, FL 32043	
Title:	D	( ) Delete
Name:	TALBOTT, DAVID	
Address:	4038 HWY 17, SOUTH	
City-St-Zip:	GREEN COVE SPRINGS, FL 32043	
Title:	D	( ) Delete
Name:	MEARS, SCOTT	
Address:	201 PARK STREET	
City-St-Zip:	GREEN COVE SPRINGS, FL 32043	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: HARRY L. HUNTER S 01/10/2005

Electronic Signature of Signing Officer or Director — Date