2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749994

City-St-Zip:

CLERMONT, FL

FILED Jan 27, 2009 Secretary of State

Entity Name: TEMPLE OF THE LIVING GOD, INC. **Current Principal Place of Business: New Principal Place of Business:** 415 E. OLD HIGHWAY 50 415 E. OLD HIGHWAY 50 P.O. BOX F MINNEOLA, FL 34755 MINNEOLA, FL 34755 **New Mailing Address: Current Mailing Address:** PO BOX 640 MINNEOLA, FL 34755 US FEI Number: 59-2851561 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROWLAND-YATES, LOYCE 411 E. OLD HIGHWAY 50 MINNEOLA, FL 32755 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ROWLAND-YATES, LOYCE, Name: Name: Address: 411 E OLD HWY 50 Address: City-St-Zip: MINNEOLA, FL City-St-Zip: Title: VD () Delete Title: () Change () Addition BAKER, BRENDA JUNE Name: Name: Address: 107 SUNNYSIDE DR Address: City-St-Zip: CLERMONT, FL City-St-Zip: Title: () Delete Title: () Change () Addition DOBSON, SHIRLEY, Name: Name: 9012 J UNDERWOOD RD Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

City-St-Zip:

SIGNATURE: SHIRLEY DOBSON STD 01/27/2009