## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753397

Mar 07, 2005
Secretary of State

Entity Name: THE CHURCH OF THE LIVING GOD THE PILLAR AND GROUND OF THE TRUTH

Current Principal Place of Business: New Principal Place of Business:

818 FOURTH STREET PO BOX 2514 WEST PALM BEACH, FL 33401

Current Mailing Address: New Mailing Address:

OFFICE OF THE GENERAL SECRETARY PO BOX 830384 TUSKEGEE, AL 36083

FEI Number: 59-6604263 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:

LEWIS, LUKE D
818 4TH ST
WEST PALM BEACH FL, FL 33401 US
LEWIS, LUKE D
818 4TH ST
P.O. BOX 2514

WEST PALM BEACH, FL 33402 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: 03/07/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**FILED** 

Fitle: P ( ) Delete Title: P (X) Change ( ) Addition

Name: LEWIS, MEHARRY H Name: LEWIS, MEHARRY H
Address: 2301 TENITA AVENUE Address: 2301 TENITA AVENUE, P.O. BOX 830384

City-St-Zip: TUSKEGEE, AL 36083 City-St-Zip: TUSKEGEE, AL 36083

Title: ST ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 LOCKHART, GLORIA L
 Name:

 Address:
 954 44TH STREET
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33407
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 LEWIS, LUKE D
 Name:

 Address:
 818 4TH ST
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33401
 City-St-Zip:

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$ 

 Name:
 DAVIS, T. L
 Name:
 GARDNER, GRACE D

 Address:
 1339 NW 15 AVENUE
 Address:
 2020 N.W. 24TH ROAD

 City-St-Zip:
 OCALA, FL
 34475 US

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 RIVERS, JAMES K
 Name:

 Address:
 5834 HARRIS AVENUE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32211
 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: MEHARRY H. LEWIS P 03/07/2005