2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 15, 2003
Secretary of State

DOCUMENT# 769148

Entity Name: LIVING WORD INTERNATIONAL MINISTRIES AND FELLOWSHIP, INC.

Current Principal Place of Business:

1291 FOOTE MCCLELLAN RD
COLBERT, GA 30628 US

New Principal Place of Business:

Current Mailing Address:

1291 FOOTE MCCLELLAN RD
COLBERT, GA 30628 US

New Mailing Address:

FEI Number: 39-1500184 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RUSHING, CHARLOTTE
4924 STEELDUST LN
LUTZ, FL 33549

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:	PD	( ) Delete
Name:	SMITH, ARNOLD P,	
Address:	1291 FOOTE MCCLELLAN RD	
City-St-Zip:	COLBERT, GA	
Title:	VD	( ) Delete
Name:	SMITH, BETTY J,	
Address:	1291 FOOTE MCCLELLAN RD	
City-St-Zip:	COLBERT, GA	
Title:	S	( ) Delete
Name:	RUSHING, CHARLOTTE	
Address:	4924 STEELDUST LANE	
City-St-Zip:	LUTZ, FL 33549	
Title:	D	( ) Delete
Name:	CHANDLER, SAMMY	
Address:	113 SMITH ST.	
City-St-Zip:	TUPELO, MS 38801	

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:	

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: ARNOLD P. SMITH PD 01/15/2003

Electronic Signature of Signing Officer or Director — Date