

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

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

02-13-2008 90020 010 ****70.00

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1. Entity Name
**WORLD'S CHURCH OF THE LIVING GOD OF POMPANO
BEACH, FLORIDA INC.**



Principal Place of Business

**4001 D VIRGINIA AVE.
FORT PIERCE, FL 34981 US**

Mailing Address

**P.O. BOX 7674
PORT ST. LUCIE, FL 34985 US**

40023761



DO NOT WRITE IN THIS SPACE

02022008 No Chg-NP

CR2E037 (4/06)

4. FEI Number
59-2309279

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ROLLINS, FRANK
1020 SE LANSLOWNE AVE
PORT SAINT LUCIE, FL 34983**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	SD
NAME	BENJAMIN, QUEEN
STREET ADDRESS	1110 SE LETHA CIR #3
CITY-ST-ZIP	STUART, FL 34994
TITLE	T
NAME	MILLER, ANNIE JOYCE
STREET ADDRESS	1341 CARRINGTON SE
CITY-ST-ZIP	PORT ST. LUCIE, FL 34957
TITLE	PD
NAME	ROLLINS, FRANK
STREET ADDRESS	1020 SE LANSLOWNE AVE
CITY-ST-ZIP	PORT SAINT LUCIE, FL 34983
TITLE	C
NAME	WELCH, WALLACE
STREET ADDRESS	4900 IRRINGTON TERRACE
CITY-ST-ZIP	PORT ST LUCIE, FL 34983
TITLE	VP
NAME	Larry Lee Harden
STREET ADDRESS	2410 NW 6th St.
CITY-ST-ZIP	Pompano Beach, Fl. 33069
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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:

Frank Rollins
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 1, 2008
Date

(772) 873-9340
Daytime Phone #