

F20000001313

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

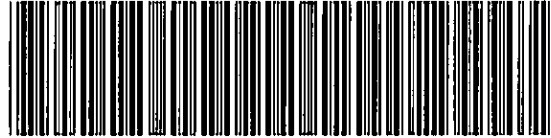
Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W20000002488

Office Use Only



100340253451

02/17/20--01011--005 \*\*27.50

FILED  
2020 MAR -9 PM 4:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\$



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 25, 2020

ILSE SPEARS  
4082 LAKE BLUFF DRIVE  
MASCOTTE, FL 34753

SUBJECT: LIVING CANVAS MINISTRIES  
Ref. Number: W20000020488

We have received your document for LIVING CANVAS MINISTRIES and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yvette Scott  
Document Specialist II

C

Letter Number: 920A00004194

RECEIVED

MAR 09 2020

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO  
CONDUCT ITS AFFAIRS IN FLORIDA**

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN  
THE STATE OF FLORIDA:

1. Living Canvas Ministries, Nonprofit Corporation

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

LCM

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Washington 3. 84-4482310  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 01-31-2020 5. Perpetual  
(Date of Incorporation) (Date of duration, if other than perpetual)

6. n/a  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine period of liability.)

7. 4082 Lake Bluff Drive, Mascotte, FL 34753  
(Principal office street address)

Same  
(Current mailing address, if different)

8. Promote Christian doctrine, establish & oversee places of worship, evangelize worldwide, train, develop & support leaders  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Ilse Spears

Office Address: 4082 Lake Bluff Drive  
Mascotte, Florida 34753  
(City) (Zip Code)

10. Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Ilse Spears

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED  
2020 MAR -9 PM 4:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

#### A. DIRECTORS

☐ Chairman Name: \_\_\_\_\_

☐ Vice Chairman Address: \_\_\_\_\_

☒ Director Mike Spears - 4082 Lake Bluff Drive,  
Mascotte, FL 34753

☒ President Ilse Spears - "

☐ Vice President \_\_\_\_\_

☐ Secretary ☐ Treasurer

☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_

☐ Vice Chairman Address: \_\_\_\_\_

☒ Director Catherine Botha - 7505 County Rd 561  
Clermont, FL 34714

☐ President \_\_\_\_\_

☐ Vice President \_\_\_\_\_

☐ Secretary ☐ Treasurer

☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_

☐ Vice Chairman Address: \_\_\_\_\_

☒ Director Joy Tate - 1922 McGee Rd  
Little Platte, LA 70586

☐ President \_\_\_\_\_

☐ Vice President \_\_\_\_\_

☐ Secretary ☐ Treasurer

☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_

☐ Vice Chairman Address: \_\_\_\_\_

☒ Director Jackie Meche - 101 Tiffany Lane  
Duson, LA 70529

☐ President \_\_\_\_\_

☐ Vice President \_\_\_\_\_

☐ Secretary ☐ Treasurer

☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_

☐ Vice Chairman Address: \_\_\_\_\_

☐ Director \_\_\_\_\_

☐ President \_\_\_\_\_

☐ Vice President \_\_\_\_\_

☐ Secretary ☐ Treasurer

☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_

☐ Vice Chairman Address: \_\_\_\_\_

☐ Director \_\_\_\_\_

☐ President \_\_\_\_\_

☐ Vice President \_\_\_\_\_

☐ Secretary ☐ Treasurer

☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

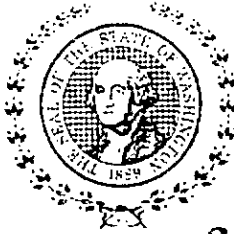
FILED  
2020 MAR -9 PM 4:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

13. Ilse Spears  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. Ilse Spears, President  
(Typed or printed name and capacity of person signing application)

UNITED STATES OF AMERICA

The State of



Washington

Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

**CERTIFICATE OF EXISTENCE**

OF

**LIVING CANVAS MINISTRIES**

FILED  
2020 MAR -9 PM 4:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

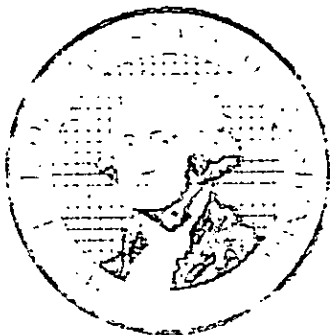
I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 01/31/2020.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 02/04/2020  
UBI Number: 604 575 663



*Kim Wyman*