# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 28, 2012**
**Secretary of State**

DOCUMENT# K96461

**Entity Name:** LIVING WATER TROPICAL FRUIT AND NUT TREE NURSERY JOHN 4:10, INC.

**Current Principal Place of Business:**

%CRAIG L. JOHNSTON
4558 61ST ST S
LAKE WORTH, FL 33463 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 781
BOYNTON BEACH, FL 33425 US

**New Mailing Address:**

**FEI Number: 65-0144775** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

JOHNSTON, CRAIG L
4558 61ST ST SOUTH
LAKE WORTH, FL 33463 US

**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
Name: JOHNSTON, CRAIG L
Address: 4558 61ST ST SOUTH
City-St-Zip: LAKE WORTH, FL 33463

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CRAIG L. JOHNSTON PD 02/28/2012

Electronic Signature of Signing Officer or Director Date