2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N00000004357

1. Entity Name

LIVING FAITH WORLD MINISTRIES, INC.

FILED Jan 10, 2007 08:00 AM Secretary of State

Principal Place of Business 950 DERBYSHIRE RD DAYTONA BEACH, FL 32117 Mailing Address

PO BOX 10861

DAYTONA BEACH, FL 32120-0861



DO NOT WRITE IN THIS SPACE

CR2E037 (4/06) 01032007 No Chg-NP

4. FEI Number 59-3639536

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BARHOO, TONY PASTOR 1355 CADILLAC DRIVE DAYTONA BEACH, FL 32117

SIGNATURE

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.					
Ann 1/2/07					
SIGNATURE Sprinture typed or prints fame of readstared agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
	Filing Fac is \$61.25 9. Election Campaign Finance		sing \$5.00 years	\$5.00 May Be	000000581450 01/10/07-80089-003 61.25
	Filing Fee is \$61.25 Due by May 1, 2007	Trust Fund Contribution.	.	Added to Fees	01/10/01-00003-003 01.23
10. OFFICERS AND DIRECTORS					
TITLE	S3				
NAME	FIELDS, EDNA				
STREET ADDRESS	636 HEINMAN ST				
CITY-ST-ZIP	DAYTONA BEACH, FL 32114			•	
TITLE	D				
NAME	LEE, HAROLD				
STREET ADDRESS	583 FLOMICH STREET				
CITY-ST-ZIP	HOLLY HILL, FL 32117				
TITLE	D				
NAME	COLHOUN, PATRICIA				
STREET ADDRESS	3 TANAGER COURT			DΩ	NOT WRITE
CITY-ST-ZIP	DAYTONA BEACH, FL 32117				NOI WINIE
TITLE	м			IN	THIS SPACE
NAME	WHITE, DERRICK				11110 01710=
STREET ADDRESS	86 HUDSON ST				
CITY-ST-ZIP	DAYTONA BEACH, FL 32114				
TITLE	D				
NAME	HENRY, PATRICK				
STREET ADDRESS	831 S. KOTTLE CIRCLE				
CITY-ST-ZIP	DAYTONA BEACH, FL 32114				
TITLE	E	i			
NAME	BETHUNE, SANDRA				
STREET ADDRESS	820 S. KOTTLE CIRCLE				
CITY-ST-ZIP	DAYTONA BEACH, FL 32114	<u></u> j			
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 repeiver 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.					