

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01952

FILED  
May 30, 2006  
Secretary of State

**Entity Name:** LIVINGWAY CHRISTIAN FELLOWSHIP CHURCH INTERNATIONAL, INC.

**Current Principal Place of Business:**

6415 N. PEARL ST.  
JACKSONVILLE, FL 32208

**New Principal Place of Business:**

**Current Mailing Address:**

6415 N. PEARL ST.  
JACKSONVILLE, FL 32208

**New Mailing Address:**

**FEI Number:** 59-2515572      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BEASLEY, VIOLET R BUSINES  
6415 N. PEARL ST.  
JACKSONVILLE, FL 32208      US

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

FREEMAN, CHARLES D BUSINES  
6415 N. PEARL ST.  
JACKSONVILLE, FL 32208      US

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: CHARLES D. FREEMAN

05/30/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T      ( ) Delete  
Name: GRAY, LARRY J  
Address: 9120 FITZWALTER RD.  
City-St-Zip: JACKSONVILLE, FL 32208

Title: T      ( ) Delete  
Name: MAXEY, JOHN L  
Address: 6366 BARRY DR.  
City-St-Zip: JACKSONVILLE, FL 32208

Title: T      ( ) Delete  
Name: SIMMONS, JAMES T  
Address: 9630 EVANS RD.  
City-St-Zip: JACKSONVILLE, FL 32208

Title: D      ( ) Delete  
Name: HENDLEY, LONNIE B  
Address: 1388 AGNES RD.  
City-St-Zip: JACKSONVILLE, FL 32208

Title: P      ( ) Delete  
Name: SPEIGHT, ANTHONY L CEO  
Address: 12620 MISSION HILLS CIR. NORTH  
City-St-Zip: JACKSONVILLE, FL 32225

**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:

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 Chapter 119, 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: DR. ANTHONY L. SPEIGHT

CEO

05/30/2006

Electronic Signature of Signing Officer or Director

Date