2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# N02000000709

Entity Name: SPIRIT AND TRUTH CHURCH OF THE LIVING GOD, INC.

Current Principal Place of Business:

1270 NORTH DRIVE
N. MIAMI BEACH, FL 33179

New Principal Place of Business:

Current Mailing Address:

1270 NORTH DRIVE
N. MIAMI BEACH, FL 33179

New Mailing Address:

FEI Number: 03-0379587 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HANSON, ALETHEA
1270 NORTH DRIVE
N. MIAMI BEACH, FL 33179 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:	TD	( ) Delete
Name:	LUTAS, MICHAEL	
Address:	6401 SW 195 AVE	
City-St-Zip:	PEMBROKE PINES, FL 33332	
Title:	PD	( ) Delete
Name:	HANSON, ALETHEA	
Address:	1270 N. DRIVE	
City-St-Zip:	N. MIAMI BEACH, FL 33179	
Title:	D	( ) Delete
Name:	O'CONNOR, HENRIETTA	
Address:	3532 NW 176 TER	
City-St-Zip:	OPA LOCKA, FL 33056	
Title:	D	( ) Delete
Name:	HANSON, KAYANN	
Address:	701 NW 210 STREET #401	
City-St-Zip:	MIAMI, FL 33169	
Title:	D	( ) Delete
Name:	MCKENZIE, W.	
Address:	1270 NORTH DRIVE	
City-St-Zip:	NORTH MIAMI BEACH, FL 33179	
Title:	D	( ) Delete
Name:	RUTHERFORD, MAURICE	
Address:	3281 NW 169 TERRACE	
City-St-Zip:	MIAMI, FL 33056	

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:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify 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: ALETHEA HANSON P 04/28/2008

Electronic Signature of Signing Officer or Director — Date