

**2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Aug 11, 2010**  
**Secretary of State**

DOCUMENT# N02000003584

**Entity Name:** FAITH OUTREACH MINISTRIES CHURCH OF THE LIVING GOD, INC.**Current Principal Place of Business:**3409 DEWBERRY AVE  
PLYMOUTH, FL 32768**New Principal Place of Business:****Current Mailing Address:**PO BOX 28  
PLYMOUTH, FL 32768**New Mailing Address:****FEI Number:** 59-3010254**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**WILLIAMS, CHARLES  
328 W 5TH ST  
APOPKA, FL 32703 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: D  
Name: WILLIAMS, CARLTON  
Address: 27249 CR448A  
City-St-Zip: MOUNT DORA, FL 32757

Title: D  
Name: WILLIAMS, CLARA  
Address: 328 W. 5TH ST  
City-St-Zip: APOPKA, FL 32703

Title: D  
Name: WILLIAMS, CAROLINE  
Address: 27249 CR448A  
City-St-Zip: MOUNT DORA, FL 32757

Title: D  
Name: RAINEY, TROY  
Address: 15821 SWITCH CANE ST  
City-St-Zip: CLERMONT, FL 34711

Title: D  
Name: WILLIAMS, CHARLES  
Address: 328 W. 5TH ST.  
City-St-Zip: APOPKA, FL 32703

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

SIGNATURE: CAROLINE M. WILLIAMS

D

08/11/2010

Electronic Signature of Signing Officer or Director

Date