

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000003691

FILED
Apr 30, 2003
Secretary of State

Entity Name: LIVING WATER FELLOWSHIP, INC.

Current Principal Place of Business:

PO BOX 485
LAND O'LAKES, FL 34639

New Principal Place of Business:

Current Mailing Address:

PO BOX 485
LAND O'LAKES, FL 34639

New Mailing Address:

FEI Number: 71-0886062

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARDY, WALTER B
22711 PENNY LOOP
LAND O'LAKES, FL 34639 US

Name and Address of New Registered Agent:

BALOGH, VALERIE S
7430 BITTERNUT AVE.
WEBSTER, FL 33597 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: VALERIE S. BALOGH

04/30/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HARDY, WALTER B
Address: 22711 PENNY LOOP
City-St-Zip: LAND O'LAKES, FL 34639

Title: D () Delete
Name: BALOGH, VALERIE S
Address: 7430 BITTERNUT AVE
City-St-Zip: WEBSTER, FL 33597

Title: D () Delete
Name: KIRKMAN, TODD
Address: 18315 CROOKED LANE RD
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BALOGH, VALERIE S
Address: 7430 BITTERNUT AVE.
City-St-Zip: WEBSTER, FL 33597

Title: D (X) Change () Addition
Name: SICURELLA, DEBBIE
Address: 26422 GLENWOOD DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: D (X) Change () Addition
Name: BALOGH, JOHN S
Address: 7430 BITTERNUT AVE.
City-St-Zip: WEBSTER, FL 33597

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: VALERIE S. BALOGH

DIR

04/30/2003

Electronic Signature of Signing Officer or Director

Date