2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005
Secretary of State

DOCUMENT# N02000006290

Entity Name: LIVING WATERS RENAISSANCE, INC.

Current Principal Place of Business:

1553 BRIDGEWOOD DRIVE
BOCA RATON, FL 33434

New Principal Place of Business:

123 NW 13 ST
214-04
BOCA RATON, FL 33432

Current Mailing Address:

1553 BRIDGEWOOD DRIVE
BOCA RATON, FL 33434

New Mailing Address:

123 NW 13 ST
214-04
BOCA RATON, FL 33432

FEI Number: 45-0503797 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ELLIOTT, SONIA B DR.
1553 BRIDGEWOOD DRIVE
BOCA RATON, FL 33434 US

Name and Address of New Registered Agent:

ELLIOTT, SONIA B DR.
123 NW 13 ST
214-04
BOCA RATON, FL 33432 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: _____ 04/28/2005
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DR. ( ) Delete
Name: ELLIOTT, SONIA B DR.
Address: 1553 BRIDGEWOOD DRIVE
City-St-Zip: BOCA RATON, FL 33434

Title: D ( ) Delete
Name: VEGODA, DEVARAN
Address: 10807 W. CLARIMONT CIRLCE
City-St-Zip: TAMARAC, FL 33321

Title: DR. ( ) Delete
Name: ALLEN, DEBRA
Address: 890 N.W. 168TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change ( ) Addition
Name: ELLIOTT, SONIA B DR.
Address: 123 NW 13 ST SUITE 214-04
City-St-Zip: BOCA RATON, FL 33432

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 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: SONIA B. ELLIOTT DR 04/28/2005
Electronic Signature of Signing Officer or Director — Date