

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2003 8:00 am
Secretary of State

05-23-2003 90144 044 ****70.00

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DOCUMENT # N02000009235

1. Entity Name

**THE LIVING WATERS CHURCH OF JESUS CHRIST MINISTR
IES INC.**



Principal Place of Business

856 REEDY CV
CASSELBERRY FL 32707

Mailing Address

P.O. BOX 181422
CASSELBERRY FL 32718-1422

2. Principal Place of Business

3. Mailing Address

301 E. SR 434

P.O. Box 181422

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Winter Springs FL

CASSELBERRY FL

Zip

Country, USA

Zip

Country

32708

USA

32718-1422

USA

4. FEI Number

05-0544632

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HARRIS, WALTER J PASTOR
856 REEDY COVE
CASSELBERRY FL 32707

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

T
NAME HARRIS, SHARON F
STREET ADDRESS 856 REEDY CV
CITY-ST-ZIP CASSELBERRY FL 32707 ☐ Delete

☐ Change ☐ Addition

D
NAME JONES, JOHNNY SR.
STREET ADDRESS P.O. BOX 181422
CITY-ST-ZIP CASSELBERRY FL 32718-1422 ☐ Delete

☐ Change ☐ Addition

S
NAME FREDERICKS, TATASHA .
STREET ADDRESS 3341 MAIN ST.
CITY-ST-ZIP SANFORD FL 32771 ☐ Delete

☐ Change ☐ Addition

D
NAME HARRIS-PRINGLE, CHARA L FIN. SE
STREET ADDRESS 1114 CYPRESS AVE
CITY-ST-ZIP SANFORD FL 32771 ☐ Delete

☐ Change ☐ Addition

D
NAME JACKSON, JACQUELYN
STREET ADDRESS 556 CREEKWOOD DR.
CITY-ST-ZIP ORLANDO FL 32809 ☐ Delete

☐ Change ☐ Addition

P
NAME HARRIS, WALTER J SR.
STREET ADDRESS 856 REEDY CV
CITY-ST-ZIP CASSELBERRY FL 32707 ☐ Delete

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Walter J Harris Sr*

03/05/03

407-686-2930

CR2E037 (10/02)