2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009354

Entity Name: SAMMIE L. DANIELS MINISTRIES, INC.

Apr 27, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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LIVING WORD OUTREACH 283 N.W. JEFFERSON ST. LAKE CITY, FL 32055

Current Mailing Address: New Mailing Address:

1728 SW IRONWOOD DR. LAKE CITY, FL 32025

FEI Number: 13-4247616 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DANIELS, SAMMIE L 1728 SW IRONWOOD DR. LAKE CITY, FL 32025

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PVD (X) Change () Addition () Delete DANIELS, SAMUEL L DANIELS, SAMMIE L Name: Name: RT. 18 BOX 731-37 Address: 1728 SW IRONWOOD DR. Address: City-St-Zip: LAKE CITY, FL 32025 City-St-Zip: LAKE CITY, FL 32025

(X) Change () Addition Title: VD () Delete Title: Name: DANIELS, DENISE A Name: DANIELS, DENISE A

Address: RT 18 BOX 731-37 Address: 1728 SW IRONWOOD DR. City-St-Zip: LAKE CITY, FL 32025 City-St-Zip: LAKE CITY, FL 32025

Title: () Delete Title: (X) Change () Addition STEVENSON, TYWANNA STEVENSON, TYWANNA Name: Name:

Address: PO BOX 732 Address: P.O. BOX 153

City-St-Zip: NEWBERRY, FL 32669 City-St-Zip: MICANOPY, FL 32667

Title: () Delete Title: () Change () Addition Name:

SIMMONS, JOHNNIE MAE Name: Address: PO BOX 335 Address: City-St-Zip: CRESCENT CITY, FL 32012 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: SAMMIE L DANIELS **PVD** 04/27/2007