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May 06, 1999 8:00 am
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05-06-1999 90232 028 ****61.25

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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N02360					
1. Corporation Name LIVING AND ACTIVE WORD MINISTRIES, INC.					
Principal Place of Business C/O LEONARD L. LORD 9525 SUNBEAM DR NEW PORT RICHEY FL 34654			Mailing Address C/O LEONARD L. LORD 9525 SUNBEAM DR NEW PORT RICHEY FL 34654		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 04/04/1984 4. FEI Number 59-2439204 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent LORD, LEONARD L. 9525 SUNBEAM DR NEW PORT RICHEY FL 34654			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE PD NAME LORD, LEONARD L. STREET ADDRESS 9525 SUNBEAM DRIVE CITY-ST-ZIP NEW PORT RICHEY FL			1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE SD NAME KITCHENS, MARY JAYNE STREET ADDRESS 880 MARKET ST. CITY-ST-ZIP MEEKER CO			2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
TITLE VDT NAME LORD, ROGER D. STREET ADDRESS 6848 PORTER RD CITY-ST-ZIP NEW PORT RICHEY FL			3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		
TITLE D NAME GEORGE, JIMMY STREET ADDRESS 5366 SCHOOL ROAD CITY-ST-ZIP NEW PORT RICHEY FL			4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE D NAME SPINKS, RANDOLPH STREET ADDRESS T. 5 BOX 1900 CITY-ST-ZIP FITZGERALD GA			5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITLE TD NAME LORD, KATHY STREET ADDRESS 9525 SUNBEAM DRIVE CITY-ST-ZIP NEW PORT RICHEY FL			6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/2/99

Date

727-863-6201

Daytime Phone #

CR2E037 (11/98)