

2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 27, 2005
Secretary of State

DOCUMENT# N03000005078

Entity Name: LIGHTHOUSE BY RIVERS OF LIVING WATER APOSTOLIC PENTECOSTAL CHURCH, INC.**Current Principal Place of Business:**430 BAYBERRY DRIVE
LAKE PARK, FL 33403**New Principal Place of Business:**430 BAYBERRY DRIVE
LAKE PARK, FL 33403 US**Current Mailing Address:**430 BAYBERRY DRIVE
LAKE PARK, FL 33403**New Mailing Address:**430 BAYBERRY DRIVE
LAKE PARK, FL 33403 US**FEI Number:** 20-1616808**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CAGE, FREDRICK L ESQ
430 BAYBERRY DRIVE
LAKE PARK, FL 33403 US**Name and Address of New Registered Agent:**CAGE, FREDRICK L SR
430 BAYBERRY DRIVE
LAKE PARK, FL 33403 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: FREDRICK L. CAGE

07/27/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CAGE, FREDRICK L SR
Address: 430 BAYBERRY DRIVE
City-St-Zip: LAKE PARK, FL 33403

Title: VD () Delete
Name: CAGE, TATIANA N
Address: 430 BAYBERRY DRIVE
City-St-Zip: LAKE PARK, FL 33403

Title: VD () Delete
Name: FREEMAN, CAROLYN
Address: 5601 CARIBBEAN BLVD
City-St-Zip: WEST PALM BEACH, FL 33407

Title: SD (X) Delete
Name: DENSON, BIRTNELL
Address: 4683 ORLEAN CT APT D
City-St-Zip: WEST PALM BEACH, FL 33415

Title: TD (X) Delete
Name: JONES, MARCELINA
Address: 1300 W 6TH ST
City-St-Zip: RIVIERA BEACH, FL 33404

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CAGE, FREDRICK L SR
Address: 430 BAYBERRY DRIVE
City-St-Zip: LAKE PARK, FL 33403 US

Title: VP (X) Change () Addition
Name: CAGE, TATIANA N
Address: 430 BAYBERRY DRIVE
City-St-Zip: LAKE PARK, FL 33403 US

Title: T (X) Change () Addition
Name: DENSON, BIRTNELL
Address: P.O. BOX 530904
City-St-Zip: LAKE PARK, FL 33403 US

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: FREDRICK L. CAGE, PRESIDENT

PD

07/27/2005

Electronic Signature of Signing Officer or Director

Date