

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005581

FILED
Apr 03, 2009
Secretary of State

Entity Name: LIVING WATER LIFE CENTER, INC.

Current Principal Place of Business:

4551 SE ST ROAD 121
MORRISTON, FL 32668

New Principal Place of Business:

6491 SE 123RD TERRACE
MORRISTON, FL 32668

Current Mailing Address:

4551 SE ST ROAD 121
MORRISTON, FL 32668

New Mailing Address:

6491 SE 123RD TERRACE
MORRISTON, FL 32668

FEI Number: 20-0063346

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIELDS, DANA B
4551 SE ST ROAD 121
MORRISTON, FL 32668 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: FIELDS, DANA B
Address: 4551 SE ST ROAD 121
City-St-Zip: MORRISTON, FL 32668

Title: VP () Delete
Name: FIELDS, CALLIE M
Address: 4551 SE ST ROAD 121
City-St-Zip: MORRISTON, FL 32668

Title: DIR () Delete
Name: THOMPSON, RICK
Address: 1501 RIVERLAND ROAD
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: DIR () Delete
Name: THOMAS, BRIAN
Address: 4193 VICLIFF ROAD
City-St-Zip: W PALM BEACH, FL 33406

Title: TREA () Delete
Name: FIELDS, ALBERT A JR
Address: 11055 SE FEDERAL HWY #93
City-St-Zip: HOBE SOUND, FL 33455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: DANA B FIELDS

P

04/03/2009

Electronic Signature of Signing Officer or Director

Date