2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N03000011099

1. Entity Name
LIVING RIGHT CHURCH OF JESUS CHRIST MINISTRIES, INC.

Principal Place of Business	Mailing Address
2045 NW 43RD ST MIAMI, FL 33142	2045 NW 43RD ST MIAMI, FL 33142

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03102006 No Chg-NP   CR2E037 (11/05)

4. FEI Number	Applied For
11-3719170	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BROWN, MARY C R
2045 NW 43RD ST
MIAMI, FL 33142

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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 _____ *N/A* _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	BROWN, MARY
STREET ADDRESS	2045 NW 43RD ST
CITY-ST-ZIP	MIAMI, FL 33142

TITLE	V
NAME	BROWN, TYRONE E
STREET ADDRESS	2045 NW 43 ST
CITY-ST-ZIP	MIAMI, FL 33142

TITLE	S
NAME	BARRON, TRAWONNA
STREET ADDRESS	4800 NW 2 AVE
CITY-ST-ZIP	MIAMI, FL 33127

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Mary C R Brown*   04-28-06   786-499-0258

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #