## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000004329

FILED Apr 29, 2007 Secretary of State

Entity Name: RADIANT LIVING WORSHIP CENTER, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	H DIXIE HWY LD BEACH, FL 33441			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
P.O. BOX DEERFIEL	305 LD BEACH, FL 33441			
FEI Number	: 20-1659841 FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and	d Address of Current Registered Agent:	Name and Address o	f New Registered Agent:	
	THONY T 7TH TERRACE O BEACH, FL 33069 US			
	e named entity submits this statement for the e of Florida.	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registered A	gent	Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGE	ES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PSD ( ) Delete PELT, ANTHONY T 305 NW 17 TERRACE POMPANO BEACH, FL 33069	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPAA ( ) Delete PELT, MILLICENT 305 NW 17 TERRACE POMPANO BEACH, FL 33069	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD ( ) Delete POOLE, DEAN 621 SW 10TH CT. DEERFIELD BCH, FL 33441	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD ( ) Delete BEASLEY, LATONYA 760 SE 2ND AVE., C-202 DEERFIELD BCH, FL 33441	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BM ( ) Delete HAYNIE, TRACY 609 NW 1ST WAY DEERFIELD BEACH, FL 33441	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BM () Delete HAYNIE, FREDERICK JR 609 NW 1ST WAY DEERFIELD BEACH, FL 33441	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: ANTHONY T. PELT PSD 04/29/2007