

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004329

FILED
Jan 25, 2008
Secretary of State

Entity Name: RADIANT LIVING WORSHIP CENTER, INC.

Current Principal Place of Business:

49 SOUTH DIXIE HWY
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 305
DEERFIELD BEACH, FL 33441

New Mailing Address:

FEI Number: 20-1659841 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PELT, ANTHONY T
305 NW 17TH TERRACE
POMPANO BEACH, FL 33069 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: PSD () Delete
Name: PELT, ANTHONY T
Address: 305 NW 17 TERRACE
City-St-Zip: POMPANO BEACH, FL 33069

Title: VPAA () Delete
Name: PELT, MILLICENT
Address: 305 NW 17 TERRACE
City-St-Zip: POMPANO BEACH, FL 33069

Title: TD () Delete
Name: POOLE, DEAN
Address: 621 SW 10TH CT.
City-St-Zip: DEERFIELD BCH, FL 33441

Title: SD () Delete
Name: BEASLEY, LATONYA
Address: 760 SE 2ND AVE., C-202
City-St-Zip: DEERFIELD BCH, FL 33441

Title: BM () Delete
Name: HAYNIE, TRACY
Address: 609 NW 1ST WAY
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: BM () Delete
Name: HAYNIE, FREDERICK JR
Address: 609 NW 1ST WAY
City-St-Zip: DEERFIELD BEACH, FL 33441

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:

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: ANTHONY T. PELT

PSD

01/25/2008

Electronic Signature of Signing Officer or Director

Date