

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004532

FILED
Apr 23, 2007
Secretary of State

Entity Name: LIVING WATERS FELLOWSHIP, INC.

Current Principal Place of Business:

2207 JOEL BOULEVARD
ALVA, FL 33920

New Principal Place of Business:

2201 JOEL BOULEVARD
ALVA, FL 33920

Current Mailing Address:

2207 JOEL BOULEVARD
ALVA, FL 33920

New Mailing Address:

2201 JOEL BOULEVARD
ALVA, FL 33920

FEI Number: 20-1061426

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AKERS, ROBERT N PASTOR
211 FIRESIDE CE
LEHIGH ACRES, FL 33936 US

Name and Address of New Registered Agent:

AKERS, ROBERT N PASTOR
211 FIRESIDE CT
LEHIGH ACRES, FL 33936 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:

04/23/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OSBORNE, JOE D
Address: 423 RUSHMORE AVE
City-St-Zip: LEHIGH ACRES, FL 33936

Title: V.P (X) Delete
Name: SHEPERD, FRANKLIN H
Address: 3812 3RD STREET SW
City-St-Zip: LEHIGH ACRES, FL 33971

Title: S () Delete
Name: HERNANDEZ, DAVID
Address: 3802 12TH STREET SW
City-St-Zip: LEHIGH ACRES, FL 33971

Title: T () Delete
Name: WILLIAMS, RONALD
Address: 805 PALM AVE
City-St-Zip: LEHIGH ACRES, FL 33936

Title: D () Delete
Name: SANTIAGO, ROBERTO
Address: 13 MASSACHUSETTE RD
City-St-Zip: LEHIGH ACRES, FL 33936

Title: D () Delete
Name: HODGES, JOSEPH
Address: 408 ROBERT AVE
City-St-Zip: LEHIGH ACRES, FL 33972

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHEPHERD, FRANKLIN H
Address: 3812 3RD STREET SW
City-St-Zip: LEHIGH ACRES, FL 33971

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

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

Title: T (X) Change () Addition
Name: WILLIAMS, RONALD
Address: 4306 4TH STREET SW
City-St-Zip: LEHIGH ACRES, FL 33971

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 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: DAVID HERNANDEZ

S

04/23/2007

Electronic Signature of Signing Officer or Director

Date