

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 12, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N04000011109</b>	
1. Entity Name <b>LIVING WATERS FELLOWSHIP &amp; MINISTRIES, INC.</b>	

Principal Place of Business <b>399 6TH STREET N.W. MOORE HAVEN, FL 33471</b>	Mailing Address <b>POST OFFICE BOX 803 MOORE HAVEN, FL 33471</b>
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03072007 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>87-0738598</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

**MURPHY, DONALD H JR.  
600 AVENUE F  
MOORE HAVEN, FL 33471**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reissuing) DATE \_\_\_\_\_

<b>Filing Fee is \$61.25 Due by May 1, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	<b>U000000664144 03/22/07-80032-013 61.25</b>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MURPHY, JR., DONALD H PRES. POST OFFICE BOX 1423 MOORE HAVEN, FL 33471
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MURPHY, KAYLEEN V. PRES POST OFFICE BOX 1423 MOORE HAVEN, FL 33471
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SPIRES, CHARLES SEC. 3343 HIGHWAY 70 W OKEECHOBEE, FL 34972
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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: Donald H. Murphy Jr. 3-7-07 863-946-0406

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