


**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 11, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N05000009374</b> 1. Entity Name <b>LIVING WORD MINISTRIES OF JACKSONVILLE, INC.</b>	
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Principal Place of Business <b>7363 PROSPERITY PRK, RD. N. JACKSONVILLE, FL 32214</b>	Mailing Address <b>7363 PROSPERITY PRK, RD. N. JACKSONVILLE, FL 32214</b>
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**DO NOT WRITE IN THIS SPACE**



01112008 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>06-1758249</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent  
  
**HUTCHINSON, NATHEN  
8324 ROCKY CREEK DR  
JACKSONVILLE, FL 32224**

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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 reinstating) DATE \_\_\_\_\_

<b>Filing Fee is \$61.25 Due by May 1, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WATTS, MILDRED PASTOR 7363 PROSPERITY PRK, RD. N. JACKSONVILLE, FL 32214
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WATTS, ANANIAS TRUSTEE 7363 PROSPERITY PRK, RD. N. JACKSONVILLE, FL 32214
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02/20/08-80099-019 70.00

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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: *Mildred Watts* **Mildred Watts** 2-3-08 (904) 705-2229  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #