

# 2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000009791

FILED  
Apr 25, 2011  
Secretary of State

**Entity Name:** LIVING WORD OF FAITH WORSHIP CENTER, INC

**Current Principal Place of Business:**

7035 PHILLIPS HIGHWAY  
SUITE 30  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

8789 SAN JOSE BLVD  
SUITE 110&110  
JACKSONVILLE, FL 32217

**Current Mailing Address:**

POST OFFICE BOX 57036  
JACKSONVILLE, FL 322417036

**New Mailing Address:**

**FEI Number:** 51-0555525      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

PIERCE, ANOTHONY  
12652 GATHERING OAKS DRIVE  
JACKSONVILLE, FL 32258 US

**Name and Address of New Registered Agent:**

PIERCE, ANTHONY  
4083 SUNBEAM RD  
#1120  
JACKSONVILLE, FL 32257 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: ANTHONY PIERCE

04/25/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PIERCE, ANTHONY  
Address: 4083 SUNBEAM RD #1120  
City-St-Zip: JACKSONVILLE, FL 32257

Title: D  
Name: PIERCE, VANDELLA  
Address: 4083 SUNBEAM RD #1120  
City-St-Zip: JACKSONVILLE, FL 32257

Title: D  
Name: WADE, NICHOLAS  
Address: 4247 PILGRAM WAY  
City-St-Zip: JACKSONVILLE, FL 32278

Title: D  
Name: WADE, SHARESE R  
Address: 4247 PILGRAM WAY  
City-St-Zip: JACKSONVILLE, FL 32257

I hereby 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 all other like empowered.

SIGNATURE: ANTHONY PIERCE

P

04/25/2011

Electronic Signature of Signing Officer or Director

Date