

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000719

FILED
Jan 19, 2009
Secretary of State

Entity Name: LIVING WATERS CHRISTIAN FELLOWSHIP CHURCH, INC.

Current Principal Place of Business:

3948 SUNSET ROAD
LEHIGH ACRES, FL 33971

New Principal Place of Business:

500 SUNSHINE BLVD. N
LEHIGH ACRES, FL 33971

Current Mailing Address:

3948 SUNSET ROAD
LEHIGH ACRES, FL 33971

New Mailing Address:

500 SUNSHINE BLVD. N
LEHIGH ACRES, FL 33971

FEI Number: 20-5245258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARCHOL, GARY REV
3948 SUNSET ROAD
LEHIGH ACRES, FL 33971 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: DP () Delete
Name: WARCHOL, GARY REV
Address: 3948 SUNSET ROAD
City-St-Zip: LEHIGH ACRES, FL 33971

Title: DVP () Delete
Name: BURKHEAD, MARK REV
Address: 2516 14TH STREET WEST
City-St-Zip: LEHIGH ACRES, FL 33936

Title: DS () Delete
Name: DE LONG, BEATRICE
Address: 1207 BARNSDALE STREET
City-St-Zip: LEHIGH ACRES, FL 33936

Title: DT () Delete
Name: ALDERMAN, BONITA
Address: 113 MCARTHUR AVE
City-St-Zip: LEHIGH ACRES, FL 33972

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:

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: GARY WARCHOL

REV

01/19/2009

Electronic Signature of Signing Officer or Director

Date