2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002564

FILED Mar 07, 2009 Secretary of State

Entity Name: CHURCH OF GOD KISSIMMEE LIVING WATERS, INC.

Current Principal Place of Business: New Principal Place of Business: 1001 WEST CARROLL ST. KISSIMMEE, FL 34741 **Current Mailing Address: New Mailing Address:** 1001 WEST CARROLL ST. KISSIMMEE, FL 34741 FEI Number: 59-3136369 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SWINEY, JOHN T SR. 1661 GRANDVIEW BLVD KISSIMMEE, FL 34744 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete SWINEY, JOHN T SR. SWINEY, JOHN T SR. Name: Name: 2602 GOLD DUST CRICLE Address: 1661 GRANDVIEW BLVD Address: City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip: KISSIMMEE, FL 34744 Title: () Delete Title: SEC (X) Change () Addition FELIX, WILLIAMS Name: RITA, POLLARD Name: Address: 1001 WEST CARROLL ST Address: 1001 WEST CARROLL ST City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip: KISSIMMEE, FL 34744 Title: () Delete Title: (X) Change () Addition SLATER, HUGH A JURIDITO, CABASISI Name: Name: 3265 FAIRFIELD DR 1001 W CARROLL ST Address: Address: City-St-Zip: KISSIMMEE, FL 34743 City-St-Zip: KISSIMMEE, FL 34741 Title: () Delete Title: (X) Change () Addition Name: GANT, GEORGE A JR. Name: GROVER, WAYNE 1060 SALSONA AVE 1001 W CARROLL ST Address: Address: City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip: KISSIMMEE, FL 34741 Title: TRES () Delete Title: (X) Change () Addition BROWN, NOLA S BROWN, NOLA S Name: Name: 805 FLORIDA PARKWAY 805 FLORIDA PARKWAY Address: Address: KISSIMMEE, FL 34743 City-St-Zip: City-St-Zip: KISSIMMEE, FL 34743 Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JOHN T SWINEY P 03/07/2009

WILLIAM, KING F

1001 WEST CARROLL ST

KISSIMMEE, FL 34741

Name:

Address:

City-St-Zip: