

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005452

FILED  
Jul 08, 2009  
Secretary of State

**Entity Name:** LIVING WATER CHRISTIAN FELLOWSHIP, INC.

**Current Principal Place of Business:**

6710 36TH AVENUE EAST #24  
PALMETTO, FL 34221

**New Principal Place of Business:**

**Current Mailing Address:**

6710 36TH AVENUE EAST #24  
PALMETTO, FL 34221

**New Mailing Address:**

**FEI Number:** 20-8649329      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

QUACKENBUSH, BRUCE  
6710 36TH AVENUE EAST #24  
PALMETTO, FL 34221      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: QUACKENBUSH, BRUCE  
Address: 6710 36TH AVENUE EAST #24  
City-St-Zip: PALMETTO, FL 34221

Title: D      ( ) Delete  
Name: TAYLOR, JAMIE  
Address: 3718 162ND AVENUE EAST  
City-St-Zip: PARRISH, FL 34219

Title: D      ( ) Delete  
Name: LIDDELL, LAURA  
Address: 2616 81ST AVENUE EAST  
City-St-Zip: ELLENTON, FL 34222

**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:

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: BRUCE QUACKENBUSH

D

07/08/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date