

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006001

FILED  
Jan 14, 2012  
Secretary of State

**Entity Name:** MENCHION THE LIVING WATER INC.

**Current Principal Place of Business:**

129 WINCHESTER WAY  
CRESTVIEW, FL 32539

**New Principal Place of Business:**

**Current Mailing Address:**

4205 D WEST MULEDEER DR  
USAFA, CO 80840

**New Mailing Address:**

FEI Number: 26-2888637

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MENCHION, SHAWN  
129 WINCHESTER WAY  
CRESTVIEW, FL 32539 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: CB  
Name: MENCHION, SHAWN  
Address: 129 WINCHESTER WAY  
City-St-Zip: CRESTVIEW, FL 32539

Title: CEO  
Name: MENCHION, RENITA  
Address: 129 WINCHESTER WAY  
City-St-Zip: CRESTVIEW, FL 32539

Title: CFO  
Name: GOTIER, ROGERS  
Address: 211 WINWARD COVE S  
City-St-Zip: NICEVILLE, FL 32588

Title: CMO  
Name: GOTIER, CHRISTIE  
Address: 211 WINWARD COVE S.  
City-St-Zip: NICEVILLE, FL 32588

Title: CIO  
Name: MENCHION, BYRON  
Address: 2153 GAME BIRD CT.  
City-St-Zip: TALLAHASSEE, FL 32311

Title: CC  
Name: MENCHION, KIMBERLY C.  
Address: 2153 GAME BIRD CT.  
City-St-Zip: TALLAHASSEE, FL 32311

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: SHAWN L. MENCHION

COB

01/14/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date