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Jan 31 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N22269 (7)

1. Corporation Name
CHURCH OF THE LIVING WORD, INC.



Principal Place of Business: 601 S. 33RD STREET FT. PIERCE FL 34947 US
Mailing Address: 601 S 33RD ST FT. PIERCE FL 34947-3541 US

3. Date Incorporated or Qualified: 08/27/1987
3a. Date of Last Report: 01/31/1996

21	2. Principal Place of Business	22	2a. Mailing Address	4.	FEI Number	Applied For
22	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	65-0027553		Not Applicable
23	City & State	27	City & State	5.	Certificate of Status Desired	\$8.75 Additional Fee Required
24	Zip	28	Zip	6.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
25	Country	29	Country	8.	This corporation has liability for intangible tax under s. 199.032, Florida Statutes	Yes No

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
HOPKINS, PHILLIP 7504 PENNY LANE FT. PIERCE FL 34951		81	Name
		82	Street Address (P.O. Box Number is Not Acceptable)
		83	
		84	City
		85	Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD HOPKINS, PHILLIP 7504 PENNY LANE FT. PIERCE FL	1.1 TITLE	
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	VD HOPKINS, BOBBY 6025 N US 1 FT. PIERCE FL	2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	S ROGERS, ARTHUR A. 6025 N US 1 FT. PIERCE FL	3.1 TITLE	Secretary
NAME		3.2 NAME	Robert SNEDEKER
STREET ADDRESS		3.3 STREET ADDRESS	856 16 PLACE
CITY - ST - ZIP		3.4 CITY - ST - ZIP	VERO Bch. FL 32960
TITLE	T GOODMAN, PAUL 485 14TH PLACE SW VERO BEACH FL	4.1 TITLE	TREASURE
NAME		4.2 NAME	MARK EPLIN
STREET ADDRESS		4.3 STREET ADDRESS	240 N.W. HEADER Canal Rd
CITY - ST - ZIP		4.4 CITY - ST - ZIP	FT. PIERCE FL 34945
TITLE		5.1 TITLE	Director
NAME		5.2 NAME	Arthur A. Rogers
STREET ADDRESS		5.3 STREET ADDRESS	485 N US 1
CITY - ST - ZIP		5.4 CITY - ST - ZIP	FT. PIERCE FL 34951
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE: *Phillip Hopkins* PRESIDENT 1/31/97 405-1674