FILE NOW: FILING FEE IS \$61.25

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NAME

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

FILED Mar 30 1998 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #**Corporation Name N25525 (9) LIVING WATER CHURCH OF TAMPA, INC. Principal Place of Business Mailing Address 6850 LIVING WATER PLACE 6850 LIVING WATER PLACE 3. Date Incorporated or Qualified TAMPA FL 33610 **TAMPA FL 33610** 03/21/1988 4. FEI Number Applied For 59-2852193 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. \$5.00 May Be 6. Election Campaign Financing 22 27 **Trust Fund Contribution** Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 🗌 Yes 🔀 No 23 28 Country Zip Zip Country 8. This corporation owes or has paid the current year Intaggible 24 ☐ Yes 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **B1** Name MEISTER, TRACEY Street Address (P.O. Box Number is Not Acceptable) 82 **6850 LIVING WATER PLACE** TAMPA FL 33610 83 84 Pursuant to the previsions 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 eyent, 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 obligators of Section 617,0503, Florida Statutes. MEISTER SIGNATURE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. ■ DELETE ☐ Change ☐ Addition CLARK, RONALD H. DR MALAF 1.2 NAME 6850 LIVING WATER PLACE STREET ADDRESS 1.3 STREET ADDRESS TAMPA FL CITY-ST-2IP 1.4 CITY - ST - ZIP DELETE ☐ Addition STVD Change TITLE 2.1 TITLE CLARK, BELITA BELINDA NAME 2.2 NAME 6850 LIVING WATER PLACE STREET ADDRESS 2.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE MATTHEWS, BILL NAME 3.2 NAME 11800 198TH AVE. N.W. 3.3 STREET ADDRESS STREET ADDRESS **ELKRIVER MN 55330** CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE Change Addition 4.1 TITLE TITLE MCCORD, MIKE 4. 2 NAME NAME 1907 SADDLE LAKE PL. STREET ADDRESS 4.3 STREET ADDRESS **BRANDON FL 33511** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE DAVIS, MICHAEL A NAME 5.2 NAME 2248 EAGLE BLUFF DR. STREET ADDRESS 5.3 STREET ADORESS VALRICO FL CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ■ Addition 6.1 TITLE TITLE

> 6.2 NAME **6.3 STREET ADDRESS**

14. I 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 if changed or on matter than address.

6.4 CITY-ST-ZIP

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813.420.4551