

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26098

FILED
Jan 16, 2009
Secretary of State

Entity Name: LIVING IN FAITH, INCORPORATED

Current Principal Place of Business:

807 AMBASSADOR LOOP
TAMPA, FL 33613

New Principal Place of Business:

Current Mailing Address:

807 AMBASSADOR LOOP
TAMPA, FL 33613

New Mailing Address:

FEI Number: 59-2898773

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTGOMERY, RUSSELL E
807 AMBASSADOR LOOP
TAMPA, FL 33613 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: PD () Delete
Name: MONTGOMERY, RUSSELL E
Address: 807 AMBASSADOR LOOP
City-St-Zip: TAMPA, FL 33613

Title: D () Delete
Name: HELT, CHARLES
Address: 13807 N. EDISON AVE
City-St-Zip: TAMPA, FL 33613

Title: TD () Delete
Name: HAGAN, DAVID
Address: 16613 W COURSE DR
City-St-Zip: TAMPA, FL 33624

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: RUSSELL MONTGOMERY

PRES

01/16/2009

Electronic Signature of Signing Officer or Director

Date