

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N36741

**FILED**  
**Feb 13, 2010**  
**Secretary of State**

**Entity Name:** CHURCH OF THE LIVING GOD IN MIAMI, INC.

**Current Principal Place of Business:**

1099 NW 151 ST  
MIAMI, FL 33169

**New Principal Place of Business:**

**Current Mailing Address:**

4105 NW 195 ST  
MIAMI, FL 33055

**New Mailing Address:**

**FEI Number:** 65-0225356

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HOLLOWAY, LEONARD N PD  
1206 E 17 AVE  
TAMPA, FL 33605 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  
Name: HOLLOWAY, LEONARD N  
Address: 1206 E 17 AVE  
City-St-Zip: TAMPA, FL 33605

Title: SD  
Name: BOUDREAUX, FRANCIS D  
Address: 1212 E 17 AVENUE  
City-St-Zip: TAMPA, FL 33605

Title: SD  
Name: SOLOMON, WILLIE L  
Address: 17521 NW 47TH CT  
City-St-Zip: MIAMI, FL 33055

Title: TD  
Name: WELLS, CALTON E  
Address: 4105 NW 195 STREET  
City-St-Zip: MIAMI, FL 33055

Title: VD  
Name: HOLLOWAY, LEONARD N III  
Address: 1203 E 17 AVE  
City-St-Zip: TAMPA, FL 33605

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: CALTON E WELLS

TD

02/13/2010

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

\_\_\_\_\_  
Date