FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT #

N40382

(6)

LIVING WATER WORSHIP CENTER, INC. Principal Place of Business Malling Address					
34234 SR 54 W 34234 SR 54 W ZEPHYRHILLS FL 33543-9120			0		
				3. Date Incorporated or Qualified 10/12/1990	3a. Date of Last Report 03/26/1996
· '	lace of Business	2a. Mailing Address		4. FEI Number 59-3027935	Applied For
21 26					Not Applicable \$8.75 Additional
27			5. Certificate of Status Desired	XXX Fee Required	
City & State City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip 29	Country 30	This corporation has liability for Florida Statutes	intangible tax under s. 199.032,
24	9. Name and Address of Curren		301	10. Name and Address of New R	
81 Name					
HUSTED, DONALD R JACOBS				OBS HARLEY D. JR. Address (P.O. Box Number is Not Accepte	hle)
27749 QUAIL VIEW LANE			212	1 MAIN STREET	
			83 DIIN	EDIN. FL 34698	
1	•		84 City	LOTH: 1L 34030	85 Zip Code
			DÙŊ	EDIN	FL 34698
11. Pursuant to the provisions of Sections 617.0502 and 617.1598, Fiorida 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 Soch 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 Rev 2/2/2 8 Section 617.0503, Florida Statutes.					
	Signature typed or printed the of registered age		Registered Agent signature		DATE
12.	OFFICERS AND	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS IN 12 Change XX Addition
TITLE	DP DONALD P	U DELETE .	1.1 TITLE	DIRECTOR/PRESIDENT	Change XX Addition
NAME STREET ADDRESS	HUSTED, DONALD R. 27749 QUAIL VIEW LANE		1.2 NAME 1.3 STREET ADDRESS	HADLEY D. TACODE	JR. DUNEDIN, FL. 34690
CITY-ST-ZIP	WESLEY CHAPEL FL		1.4 CITY-ST-ZIP	HARLEY D. JACOBS,	UK.
THILE	DT	☐ DELETE	2.1 TITLE	DIRECTON/SECRETARY	Addition And Addition
NAME	STRINGER, JACK F.		2.2 NAME	DIRECTOR/SECRETARY	/ I KEASUKEK
STREET ADDRESS	920 NORTH SABAL PALM WA	\Y	2.3 STREET ADDRESS	CUNTALLIF H. DWCOL	, ,
CITY - ST - ZIP	INVERNESS FL		2. 4 CITY-ST-ZIP	2121 MAIN STREET,	DUNEDIN, FL 34698
TITLE	DST	☐ DELETE	3.1 TITLE	DIRECTOR	Change Addition
NAME OXOGET ADDRESSES	HUSTED, MAUREEN S		3.2 NAME	DONALD R. HUSTED	· .
STREET ADDRESS	27749 QUAIL VIEW LANE WESLEY CHAPEL FL		3.3 STREET ADDRESS		
CITY-ST-ZIP	DVP	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME	CRAVER, BILL		4. 2 NAME	DIRECTOR	
STREET ADDRESS	7405 ALAFIA RIDGE LOOP		4.3 STREET ADDRESS	MAUREEN S. HUSTED	
CITY-ST-ZIP	RIVERVIEW FL		4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE	DIRECTOR	Change Addition
NAME			5.2 NAME	DIRECTOR	23
STREET ADDRESS			5.3 STREET ADDRESS	JACK E. STRINGER - -05/08/97010	71682 5/6/97
CITY-ST-ZIP		T Dicete	5.4 CITY - ST-ZIP	<u>-05/08/97010</u>	199067 Addition
TITLE		☐ DEL€TE	6.1 TITLE	DIRECTARS.75	Change
NAME STREET ADDRESS			6.2 NAME 6.3 Street address	BILL CRAVER	No.
[GGENUUM	l		■ Ara o Lucici um nucos		l l

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 if changed, or on an attachment with an address.

813-236-5579

FILED

May 06 1997 8:00am

Secretary of State

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