

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 03, 2006
Secretary of State**

DOCUMENT# N47337

Entity Name: RIVERS OF LIVING WATER, INT. INC.

Current Principal Place of Business:

3430 CURRYVILLE ROAD
CHULUOTA, FL 32766

New Principal Place of Business:

Current Mailing Address:

P O BOX 6209
ALEXANDRIA, LA 71307 US

New Mailing Address:

FEI Number: 62-1366756 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HALE, DANIEL B.
3430 CURRYVILLE ROAD
CHULUOTA, FL 32766 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: D () Delete
Name: HALE, DANIEL B.,
Address: 3430 CURRYVILLE RD
City-St-Zip: CHULUOTA, FL

Title: D () Delete
Name: HALE, DELIA C.,
Address: 3430 CURRYVILLE RD
City-St-Zip: CHULUOTA, FL

Title: D () Delete
Name: LINDSAY, DENNIS,
Address: 3320 M.D. LOVE #202
City-St-Zip: DALLAS, TX

Title: D () Delete
Name: LINDSAY, GINGER,
Address: 3320 M.D. LOVE #202
City-St-Zip: DALLAS, TX

Title: D () Delete
Name: HOWARD, SCOTT,
Address: 8701 ZIEGLER BLVD.
City-St-Zip: MOBILE, AL

Title: D () Delete
Name: KNOTT, GLORIETTA,
Address: 8701 ZIEGLER BLVD.
City-St-Zip: MOBILE, AL

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:

Title: () Change () Addition
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Title: () Change () Addition
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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 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: DANIEL B. HALE

PRES

07/03/2006

Electronic Signature of Signing Officer or Director

_____ Date