

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000004542

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**Entity Name:** LIVING FAITH MINISTRY, INC.

**Current Principal Place of Business:**

3220 ST. RT. 335  
BEAVER, OH 45613 US

**New Principal Place of Business:**

1841 ST. RT. 335  
BEAVER, OH 45613 US

**Current Mailing Address:**

3220 ST. RT. 335  
BEAVER, OH 45613 US

**New Mailing Address:**

1841 ST. RT. 335  
BEAVER, OH 45613 US

**FEI Number:** 65-0409152

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RODRIGUEZ, ESTHER E STD  
3220 ST. RT. 335  
BEAVER OHIO, FL 45613 US

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

RODRIGUEZ, ESTHER E STD  
1841 ST. RT. 335  
BEAVER OHIO, FL 45613 US

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:

01/06/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: RODRIGUEZ, BENITO  
Address: 1841 ST. RT. 335  
City-St-Zip: BEAVER, OH 45613 US

Title: STD  
Name: RODRIGUEZ, ESTHER E STD  
Address: 1841 ST. RT. 335  
City-St-Zip: BEAVER, OH 45613

Title: T  
Name: STOVER, MICHAEL  
Address: PO BOX 122  
City-St-Zip: GROVE CITY, OH 43123

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: ESTHER RODRIGUEZ

STD

01/06/2011

Electronic Signature of Signing Officer or Director

Date