

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002251

FILED  
Apr 26, 2004  
Secretary of State

Entity Name: LIVING WATERS CHURCH INTERNATIONAL, INC.

**Current Principal Place of Business:**

3402 E APALACHEE PARKWAY  
TALLAHASSEE, FL 32311

**New Principal Place of Business:**

2636 CAPITAL CIRCLE S.E.  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

3402 E APALACHEE PARKWAY  
TALLAHASSEE, FL 32311

**New Mailing Address:**

2636 CAPITAL CIRCLE S.E.  
TALLAHASSEE, FL 32301

FEI Number: 59-3244484

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KIRKLAND, J. PHILLIP REV.  
3402 E APALACHEE PARKWAY  
TALLAHASSEE, FL 32311

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

KIRKLAND, J. PHILLIP REV.  
2759 RAINTREE CIRCLE  
TALLAHASSEE, FL 32308

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:

04/26/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PC ( ) Delete  
Name: KIRKLAND, J. PHILLIP REV.  
Address: 2759 RAINTREE CIRCLE  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete  
Name: DOGGETT, GERALD REV  
Address: P.O. BOX 608091  
City-St-Zip: ORLANDO, FL 32860

Title: D ( ) Delete  
Name: BARKER, COY REV  
Address: 4678 CENTRAL DR  
City-St-Zip: STONE MOUNTAIN, GA

Title: D ( ) Delete  
Name: JOHNSON, JOHN REV.  
Address: 3402 E APALACHEE PARKWAY  
City-St-Zip: TALLAHASSEE, FL 32311

Title: VPST ( ) Delete  
Name: KIRKLAND, SHERYL  
Address: 2759 RAINTREE CIRCLE  
City-St-Zip: TALLAHASSEE, FL 32308

**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  
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 for the exemption stated in Section 119.07(3)(i), 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: REV. J. PHILLIP KIRKLAND

PC

04/26/2004

Electronic Signature of Signing Officer or Director

Date