

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 24, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N94000004972</b> 1. Entity Name <b>THE RIVERS OF LIVING WATER MINISTRIES OF LAUDERDALE LAKES FLORIDA, INC.</b>	
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Principal Place of Business <b>705 S STATE RD 7 BUILDING MARGATE, FL 33068</b>	Mailing Address <b>3965 NW 37TH TERRACE HOUSE LAUDERDALE LAKES, FL 33309</b>
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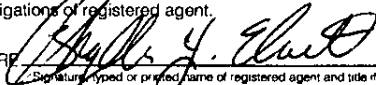
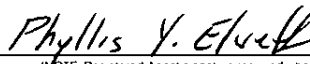
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02122008 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>65-0512823</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

<b>6. Name and Address of Current Registered Agent</b>  <b>ELUETT, PHYLLIS Y</b> <b>3965 NW 37TH TERRACE</b> <b>LAUDERDALE LAKES, FL 33319</b>	<b>DO NOT WRITE IN THIS SPACE</b>
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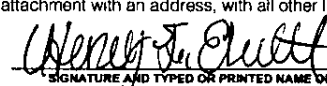
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE	 	<b>4-22-08</b> DATE

<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD</b> <b>ELUETT, HENRY F</b> <b>3965 NW 37TH TERRACE</b> <b>LAUDERDALE LAKES, FL 33309</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>ELUETT, PHYLLIS</b> <b>3965 NW 37TH TERRACE</b> <b>LAUDERDALE LAKES, FL 33309</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD</b> <b>DALEY, JAMES</b> <b>249 NW 79TH TERRACE</b> <b>POMPANO BEACH, FL 33063</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>COATS, CRYSTAL</b> <b>506 NW 23 AVENUE</b> <b>FORT LAUDERDALE, FL 33311</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 05/14/08-80041-017 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
<b>SIGNATURE:</b>  <b>Henry F. Eluett</b>	<b>4-22-08</b> Date	<b>9-51-935-0109</b> Daytime Phone #