

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002730

FILED
Apr 27, 2005
Secretary of State

Entity Name: LIVING WATER MINISTRIES OF CITRUS CO. INC.

Current Principal Place of Business:

2821 W BLACKWOOD DR
BEVERLY HILLS, FL 34465

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 640727
BEVERLY HILLS, FL 34465

New Mailing Address:

FEI Number: 59-3361242

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILKINSON, WAYNE
2821 W BLACKWOOD DR
BEVERLY HILLS, FL 34465 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: WILKINSON, WAYNE
Address: 2821 W BLACKWOOD DR
City-St-Zip: BEVERLY HILLS, FL 34465

Title: D () Delete
Name: RIZOR, CHARLES E
Address: 30 S MONROE ST
City-St-Zip: BEVERLY HILLS, FL 34465

Title: D () Delete
Name: RUNNELS, RAYMOND
Address: 535 DUNKENFIELD RD
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D () Delete
Name: WILKINSON, PETER
Address: 15 NW 28TH TERR.
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: RIZOR, CHARLES E
Address: 225 S. GRANNY PT
City-St-Zip: LECANTO, FL 34461

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: WAYNE WILKINSON

DIR

04/27/2005

Electronic Signature of Signing Officer or Director

Date