FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N9500003464

LIVING WORD CHURCH OF GOD IN CHRIST, INC.

Principal Place of Business 6969 CHEROKEE DR ZELLWOOD FL 32798-0569

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

Mailing Address

P.O. BOX 569

26

27

28

ZELLWOOD FL 32798-0569

2a. Mailing Address

City & State

Suite, Apt. #, etc.

FILED Apr 30, 1999 8:00 am § Secretary of State

04-30-1999 90040 006 ****61.25

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3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

07/21/1995

59-3106171

4. FEI Number

Zip	23	<u> </u>	28			:	<u> </u>			Fee Nec		
9. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. Street Address (P.O. Box Number Is Not Acceptable) 83	Zip	Country Zip Co			ountry		6. Election Car	mpaign Financing	П	\$5.00 i	vlay Be	
10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 10. Name	24	25 29 30					Trust Fund Contribution Added to Fees					
MOBLEY, ROSEZNA 3852 HOLLY CT ZELLWOOD FL 32798 46 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of Section 617.0502 for an accept the obligations of Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of Section 617.0503, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. TITLE 15. SIGNATURE 10. OFFICERS AND DIRECTORS 11. SIGNATURE 10. OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 11. SIGNATURE 12. NAME 13. SIRECT ADDRESS 4775 HOLLY STREET 14. SIGNATURE 15. SIRECT ADDRESS 16. SIGNATURE 16. SIGNATURE 16. SIGNATURE 17. SIGNATURE 18. SIGNATURE 19. OFFICERS AND DIRECTORS IN 12 19. OFFICERS AND DIRECTORS IN 12 10. OFFICERS AND		9. Name and Address of Currer		10. Name and Address of New Registered Agent								
3852 HOLLY CT ZELLWOOD FL 32798 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 817.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 617.0502, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE D CHANGE AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. CITY-ST-2P POLLOCK, CLYDE R SR 12 NAME ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. CITY-ST-2P 15. TITLE D Change Addition NAME POLLOCK, BARBARA B SR 22 NAME ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. CITY-ST-2P 15. TITLE D Change Addition Addition NAME POLLOCK, BARBARA B SR 22 NAME 32 STREET ADDRESS CITY-ST-2P HOLLYWOOD FL 32798 TITLE D Change Addition NAME STREET ADDRESS CITY-ST-2P TORE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. TITLE D Change Addition						Name						
### City FL 85 Zip Code 11. Pursuant to the provisions of Sections 817.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of change is registered agent, a manual registered agent, and familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signatura, typed or printed familiar of implanted signature distributions and project agent and the florida statutes.						Street Addr	reet Address (P.O. Box Number is Not Acceptable)					
### City FL 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sactions 617.0502 and 617.1509. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered sigent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered signature, typed or private intension of registered accept the obligations of, Section 617.0503, Florids Asuat associations and accept the obligations of, Section 617.0503, Florids Appen signature days accept the appointment as registered with a composition of the corporation's board of directors. I hereby accept the appointment as registered with a corporation's board of directors. I hereby accept the appointment as registered with a corporation's board of directors. I hereby accept the appointment as registered with a corporation's board of directors. I hereby accept the appointment as registered with a corporation's board of directors. I hereby accept the appointment as registered with a corporation's board of directors. I hereby accept the appointment as registered with a corporation's board of directors. I hereby accept the appointment as registered with a corporation's board of directors. I hereby accept the appointment as registered with a corporation's board of directors. I hereby accept the appointment as registered with a corporation's board of directors. I hereby accept the appointment as registered with a corporation's board of directors. I hereby accept the appointment as registered with a corporation's board of directors. I hereby accept the appointment as registered with a corporation's board of directors. I hereby accept the appointment as registered with a corporation's board of directors. I hereby accept the appointment as registered with a corporation's board of directors. I hereby accept the appointment as registered with a corporation's board of directors. I hereby accept the appointment as re					83		· · · · · · · · · · · · · · · · · · ·		·			
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Signaturis typed or printed name of registered agent and title if applicable. (NOTE Registered Agent agenturis required when intrataling) UAIL	office or registered egent, or both, in the State of Florida, Stich change was authorized by the comporation's board of directors, interest accept the appointment as registered											
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	SIGNATURE	Classic Control of the Control of th	ent and title if annicable	(NOTE: Register	ed Anen	t signatura require	d when reinstating)		DATE			
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HOLLYWOOD FL 32798	STREET ADDRESS			1.3	STREET	ADDRESS		•				
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	CITY-ST-ZIP.	1 1/2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ith this filing door -				Section 119 07/31/6	Florida Statutes	I further cert	ify that the in	formation	

indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: †

Applied For

\$8.75 Additional

Fee Required

Not Applicable