2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003464

FILED Apr 18, 2008 Secretary of State

Entity Name: LIVING WORD CHURCH OF GOD IN CHRIST, INC. **Current Principal Place of Business: New Principal Place of Business:** 6606 WILLOW ST ZELLWOOD, FL 327980390 **Current Mailing Address: New Mailing Address:** P. O. BOX 390 ZELLWOOD, FL 327980390 FEI Number: 59-3106171 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: POLLOCK, CLYDE SR. 6775 HOLLY STREET ZELLWOOD, FL 32798 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition POLLOCK, CLYDE R SR Name: Name: 6775 HOLLY STREET Address: Address: City-St-Zip: ZELLWOOD, FL 32798 City-St-Zip: Title: () Delete Title: () Change () Addition POLLOCK, BARBARA B Name: Name: Address: 6775 HOLLY STREET Address: City-St-Zip: ZELLWOOD, FL 32798 City-St-Zip: Title: () Delete Title: SD (X) Change () Addition WEBB, DEBORAH WEBB, DEBORAH Name: Name: Address: 6500 HILLTOP RD Address: 6775 HOLLY ST City-St-Zip: ORLANDO, FL 328104244 City-St-Zip: ZELLWOOD, FL 32798 () Delete Title: TD Title: TD (X) Change () Addition BROKENBOROUGH, LOVENIA Name: BARNES, LA TASHA Name: 300 ATWATER AVE, # 610 Address: Address: 7014 HOLLY ST City-St-Zip: EUSTIS, FL 32726 City-St-Zip: ZELLWOOD, FL 32798 Title: () Delete Title: (X) Change () Addition HENDERSON, TEQUILA AIKEN, CATHY Name: Name: 3726 GEORGE MARTIN RD 1605 LONG LANE Address: Address: City-St-Zip: ZELLWOOD, FL 32798 City-St-Zip: APOPK, FL 32703

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CLYDE POLLOCK **PRES** 04/18/2008