

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000205

FILED  
Jan 27, 2012  
Secretary of State

**Entity Name:** LIVING WATERS ASSEMBLY OF GOD, INC.

**Current Principal Place of Business:**

1580 BLUFF ROAD  
APALACHICOLA, FL 32320

**New Principal Place of Business:**

**Current Mailing Address:**

1580 BLUFF ROAD  
APALACHICOLA, FL 32320

**New Mailing Address:**

**FEI Number:** 59-3340068

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GAY, DANNY W  
50 HATHCOCK ROAD  
APALACHICOLA, FL 32320 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/T  
Name: GAY, DANNY W  
Address: 50 HATHCOCK RD  
City-St-Zip: APALACHICOLA, FL 32320 US

Title: D  
Name: DAVIS, RONALD  
Address: 274 24TH ST  
City-St-Zip: APALACHICOLA, FL 32320

Title: D  
Name: GROVER, ANDREWS  
Address: 1066 CYPRESS ST  
City-St-Zip: APALACHICOLA, FL 32320 US

Title: REV  
Name: HICKS, LEONARD C  
Address: 1532 LINDEN ROAD  
City-St-Zip: APALACHICOLA, FL 32320 US

Title: T  
Name: NASH, JOHN  
Address: 93 APALACHEE ST.  
City-St-Zip: APALACHICOLA, FL 32320 US

Title: T  
Name: SHIVER, ROCKY  
Address: 717 WILDERNESS ROAD  
City-St-Zip: EASTPOINT, FL 32328 US

I hereby 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 all other like empowered.

SIGNATURE: DANNY W. GAY

D/T

01/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date