

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006457

FILED
Apr 23, 2009
Secretary of State

Entity Name: LIVING WATER GOSPEL MINISTRIES, INC.

Current Principal Place of Business:

5900 TIPPIN AVE.
PENSACOLA, FL 32504

New Principal Place of Business:

Current Mailing Address:

5900 TIPPIN AVE.
PENSACOLA, FL 32504 US

New Mailing Address:

5900 TIPPIN AVE.
PENSACOLA, FL 32504

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEAN, A. DEBORAH L
6505 NORTH BLUE ANGEL PARKWAY
PENSACOLA, FL 32526 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: A () Delete
Name: DEAN, DEBORAH L
Address: 7140 PININSULA DR.
City-St-Zip: PENSACOLA, FL 32526

Title: TT () Delete
Name: THOMPSON, EBONY
Address: 12457 AIRBLANC CIR., #PD
City-St-Zip: PENSACOLA, FL 32506

Title: VT () Delete
Name: DIXON, SHANNON
Address: 510 FRISCO RD.
City-St-Zip: PENSACOLA, FL 32507

Title: S () Delete
Name: LANG, TORI
Address: 4350 FAIRFIELD DR
City-St-Zip: PENSACOLA, FL 32503

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: A (X) Change () Addition
Name: DEAN, DEBORAH L
Address: 6505 NORTHBLUE ANGEL PARKWAY
City-St-Zip: PENSACOLA, FL 32526

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

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 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: DEBORAH L DEAN

A

04/23/2009

Electronic Signature of Signing Officer or Director

Date