

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004886

FILED
Apr 28, 2005
Secretary of State

Entity Name: LIVING WORD OF GOD MINISTRIES, INC.

Current Principal Place of Business:

890 N BOUNDARY AVE
STE 102
DELAND, FL 32720131 US

New Principal Place of Business:

Current Mailing Address:

890 N BOUNDARY AVE
STE 102
DELAND, FL 32720131 US

New Mailing Address:

FEI Number: 59-3462931

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RILEY, DOLORES T REVX
890 N. BONDARY AVE.
SUITE 102
DELAND, FL 32720 US

Name and Address of New Registered Agent:

RILEY, DELORES T REVX
890 N. BONDARY AVE.
SUITE 102
DELAND, FL 32720 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: DELORES

04/28/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RILEY, DOLORES T REV
Address: 890 N BOUNDARY AVE, STE 102
City-St-Zip: DELAND, FL 327203131

Title: D () Delete
Name: EVENER, LINDA C REV
Address: 890 N BOUNDARY AVE, STE 102
City-St-Zip: DELAND, FL 327203131

Title: D () Delete
Name: WINN, ARTHUR E
Address: 2278 CHAPEL HILL DRIVE
City-St-Zip: GLENWOOD, FL 32720

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: DELORES T. RILEY

RE VX

04/28/2005

Electronic Signature of Signing Officer or Director

Date