

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006713

FILED  
May 01, 2010  
Secretary of State

**Entity Name:** LIVING WORD ASSEMBLY WORSHIP CENTER, INC.

**Current Principal Place of Business:**

615 STAFFORD LANE  
PENSACOLA, FL 32506

**New Principal Place of Business:**

6600 NORTH DAVIS HWY A  
PENSACOLA, FL 32514

**Current Mailing Address:**

615 STAFFORD LANE  
PENSACOLA, FL 32506

**New Mailing Address:**

4925 SPRINGHILL DRIVE  
PENSACOLA, FL 32503

**FEI Number:** 59-3482393      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

COLEMAN, DOREATHA  
4925 SPRINGHILL DRIVE  
PENSACOLA, FL 32503      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:** PTD  
**Name:** COLEMAN, DOREATHA  
**Address:** 4925 SPRINGHILL DRIVE  
**City-St-Zip:** PENSACOLA, FL 32503

**Title:** VPD  
**Name:** COLEMAN, MICHAEL  
**Address:** 4925 SPRINGHILL DRIVE  
**City-St-Zip:** PENSACOLA, FL 32503

**Title:** D  
**Name:** COLEMAN, VICTORIA T  
**Address:** 711 MONTCLAIRE RD  
**City-St-Zip:** PENSACOLA, FL 32505

**Title:** D  
**Name:** SMITH, DORIS  
**Address:** 6710 BELLVIEW PINE RD  
**City-St-Zip:** PENSACOLA, FL 32526

**Title:** SD  
**Name:** COLEMAN, DOREATHA L  
**Address:** 4925 SPRINGHILL DR  
**City-St-Zip:** PENSACOLA, FL 32503

**Title:** D  
**Name:** COLEMAN, MICHELLE A  
**Address:** 4925 SPRINGHILL DR  
**City-St-Zip:** PENSACOLA, FL 32503

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: DOREATHA COLEMAN

PTD

05/01/2010

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

\_\_\_\_\_  
Date