

2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 09, 2014
Secretary of State**

DOCUMENT# N98000000982

Entity Name: RIVERS OF LIVING WATER DELIVERANCE MINISTRIES INC.

Current Principal Place of Business:

2749 EXCHANGE COURT
WEST PALM BEACH, FL 33409 US

New Principal Place of Business:

1957 BRANDYWINE ROAD
108
WEST PALM BEACH, FL 33409 US

Current Mailing Address:

PO BOX 8056
WEST PALM BEACH, FL 33407 US

New Mailing Address:

1957 BRANDYWINE ROAD
108
WEST PALM BEACH, FL 33409 US

FEI Number: 65-0811439 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JONES, DOROTHY H
5040 50TH WAY
WEST PALM BEACH, FL 33409 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: DOROTHY H JONES

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: JONES, DOROTHY H
Address: 5040 50TH WAY
City-St-Zip: WEST PALM BEACH, FL 33409

Title: MMT
Name: JONES, DOROTHY H
Address: 5040 50TH WAY
City-St-Zip: WEST PALM BEACH, FL 33409

Title: FT
Name: JONES, DOROTHY H
Address: 5040 50TH WAY
City-St-Zip: WEST PALM BCH, FL 33422

Title: CSD
Name: JONES, DOROTHY H
Address: 5040 50TH WAY
City-St-Zip: WEST PALM BEACH, FL 33409

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: DOROTHY H JONES

Electronic Signature of Signing Officer or Director

PD

10/09/2014

Date