2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007296

FILED Mar 11, 2006 Secretary of State

Entity Name: THE LIVING WORD CHRISTIAN CENTER INC.

	Principal Place of Business:	New Principal Place of Business:
SUITE D	FON BLVD DGE, FL 32955	
	Mailing Address:	New Mailing Address:
SUITE D	TON BLVD DGE, FL 32955	
FEI Number	r: FEI Number Applied For ()	FEI Number Not Applicable (X) Certificate of Status Desired ()
Name and	d Address of Current Registered Agent:	Name and Address of New Registered Agent:
ROCKLEI	RIDGE DRIVE DGE, FL 32955 US	DUKES, JEROME 1803 HUDSON DRIVE ROCKLEDGE, FL 32955 US
	e named entity submits this statement for the te of Florida.	e purpose of changing its registered office or registered agent, or both,
SIGNATURE:		03/11/2006
	Electronic Signature of Registered A	Agent Date
		-
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Fitle: Name: Address:	PD () Delete DUKES, JEROME 566 BARTON BLVD STE D ROCKLEDGE, FL 32955	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: () Change () Addition Name: Address: City-St-Zip:
Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address:	PD () Delete DUKES, JEROME 566 BARTON BLVD STE D	Title: () Change () Addition Name: Address:
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: City-St-Zip:	PD () Delete DUKES, JEROME 566 BARTON BLVD STE D ROCKLEDGE, FL 32955 VD () Delete DUKES, JACQUELINE B 566 BARTON BLVD STE D	Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Address:	PD () Delete DUKES, JEROME 566 BARTON BLVD STE D ROCKLEDGE, FL 32955 VD () Delete DUKES, JACQUELINE B 566 BARTON BLVD STE D ROCKLEDGE, FL 32955 D () Delete KEYS, RICHARD 566 BARTON BLVD STE D	Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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: JEROME DUKES PD 03/11/2006