

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000921

FILED
Feb 17, 2006
Secretary of State

Entity Name: LIVING - STONE CHRISTIAN FELLOWSHIP CHURCH INC.

Current Principal Place of Business:

2225 N. MYRTLE AVE
JACKSONVILLE, FL 32209

New Principal Place of Business:

10696 LEM TURNER ROAD
14
JACKSONVILLE, FL 32218

Current Mailing Address:

2225 N. MYRTLE AVE
JACKSONVILLE, FL 32209

New Mailing Address:

10696 LEM TURNER ROAD
14
JACKSONVILLE, FL 32218

FEI Number: 59-3227112

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRICE, ROBERT L JR.
2225 N. MYRTLE AVE
JACKSONVILLE, FL 32209 US

Name and Address of New Registered Agent:

TRICE, ROBERT L JR.
10696 LEM TURNER ROAD
14
JACKSONVILLE, FL 32218 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:

02/17/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: TRICE, ROBERT L JR.
Address: 10385 MARSH HAWK DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

Title: DS () Delete
Name: TRICE, CHARLOTTE L
Address: 10385 MARSH HAWK DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

Title: DT (X) Delete
Name: WELLS, TARA Q
Address: 7921/118 STREET
City-St-Zip: JACKSONVILLE, FL 32244

Title: DT () Delete
Name: SCOTT, DEWAYNE
Address: 11505 RIVA RIDGE COURT
City-St-Zip: JACKSONVILLE, FL 32218

Title: DS () Delete
Name: HICKS, KIM
Address: 2876 LENOX AVE
City-St-Zip: JACKSONVILLE, FL 32254

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:

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 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: ROBERT L. TRICE, JR

DP

02/17/2006

Electronic Signature of Signing Officer or Director

Date