2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001454

FILED Apr 16, 2009 Secretary of State

Entity Name: THE LIVING WORD BAPTIST CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

117 PINE TREE RD EAST PALATKA, FL 32131

Current Mailing Address: New Mailing Address:

PO BOX 503

PALATKA, FL 32177

FEI Number: 59-3561080 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CREECH, JOHN R
501 MAIN ST.
PALATKA, FL 32177 US
TOURVILLE, RONALD H
363 HOOT OWL RIDGE RD.
SATSUMA, FL 32187 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: RONALD H. TOURVILLE 04/16/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: D () Delete Title: D (X) Change () Addition

Name: TOURVILLE, RON Name: TOURVILLE, RONALD H

 Address:
 P.O. BOX 593
 Address:
 P.O. BOX 593

 City-St-Zip:
 SAN MATEO, FL 32187
 City-St-Zip:
 SAN MATEO, FL 32187

Title: T () Delete Title: D (X) Change () Addition Name: CREECH, JOHN Name: RICHARDSON, BRAD

 Address:
 501 MAIN ST.
 Address:
 2300 EMERALD TERRACE

 City-St-Zip:
 PALATKA, FL 32177
 City-St-Zip:
 PALATKA, FL 32177

Title: D () Delete Title: D (X) Change () Addition Name: RICHARDSON, BRAD Name: LEHTINEN, HENRY

Name:RICHARDSON, BRADName:LEHTINEN, HENRYAddress:2300 EMERALD TERRACEAddress:104 KELVIN ST

City-St-Zip: PALATKA, FL 32177 City-St-Zip: INTERLACHEN, FL 32148

Title: D (X) Delete Title: () Change () Addition
Name: LEHTINEN. HENRY Name:

 Name:
 LEHTINEN, HENRY
 Name:

 Address:
 104 KELVIN ST
 Address:

 City-St-Zip:
 INTERLACHEN, FL 32148
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: BRAD RICHARDSON D 04/16/2009