

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005364

FILED
Aug 03, 2007
Secretary of State

Entity Name: LIVE OAK CHURCH OF NAVARRE, INC.

Current Principal Place of Business:

7304 E BAY BLVD
NAVARRE, FL 32566

New Principal Place of Business:

Current Mailing Address:

7304 E BAY BLVD
NAVARRE, FL 32566

New Mailing Address:

FEI Number: 59-3580355 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

POLAND, JEANETTE T
2369 ASH DR.
NAVARRE, FL 32566 US

Name and Address of New Registered Agent:

DRINKWATER, LISA A
6804 TIDEWATER DRIVE
NAVARRE, FL 32566 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: LISA A DRINKWATER

08/03/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOWELL, WILLIAM P
Address: 2917 SANDPIPER COVE
City-St-Zip: NAVARRE, FL 332566

Title: SD () Delete
Name: KLAUS, WILLIAM J JR
Address: 6804 TIDEWATER DR
City-St-Zip: NAVARRE, FL 32566

Title: TD () Delete
Name: POLAND, JEANETTE T
Address: 2369 ASH DR.
City-St-Zip: NAVARRE, FL 32566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: DRINKWATER, LISA A
Address: 6804 TIDEWATER DRIVE
City-St-Zip: NAVARRE, FL 32566

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: WILLIAM J. KLAUS

SD

08/03/2007

Electronic Signature of Signing Officer or Director

Date