2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742479

Entity Name: LIVING WATERS WORSHIP CENTER OF GREEN COVE

SPRINGS, INC.

Current Principal Place of Business:

1104 IDLEWILD AVE

GREEN COVE SPRINGS, FL 32043

Current Mailing Address:

PO BOX 1207

GREEN COVE SPRINGS, FL 32043-1207

FEI Number: 59-2222923 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARRIE, III, LEON J 1620 RIVERS RD

GREEN COVE SPRINGS, FL 32043 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: LEON J. BARRIE, III 01/12/2015

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title S Title P

Name HUNTER, HARRY L Name BARRIE, III, LEON J
Address 1646 RIVERS RD. Address 1620 RIVERS RD

City-State-Zip: GREEN COVE SPGS. FL 32043 City-State-Zip: GREEN COVE SPRINGS FL 32043

Title DCT Title D

Name GILLIES, DEBRA T Name MEARS, SCOTT

Address 3949 WISEMAN RD Address 201 PARK STREET

City-State-Zip: GREEN COVE SPRINGS FL 32043 City-State-Zip: GREEN COVE SPRINGS FL 32043

Title D

Name STRAVATO, MICHAEL D Address 3184 TRISHA'S COURT

SIGNATURE: HARRY L. HUNTER

City-State-Zip: GREEN COVE SPRINGS FL 32043

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.

Electronic Signature of Signing Officer/Director Detail

SECRETARY

01/12/2015

FILED Jan 12, 2015

Secretary of State

CC9219483307

Date