

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009235

Entity Name: THE LIVING WATERS CHURCH OF JESUS CHRIST MINISTRIES
INC.**FILED**
Feb 23, 2021
Secretary of State
9758550552CC**Current Principal Place of Business:**323 SHADOW OAK DR.
CASSELBERRY, FL 32707**Current Mailing Address:**323 SHADOW OAK DR.
CASSELBERRY, FL 32707 US**FEI Number: 05-0544632****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**HARRIS, WALTER J SR.
323 SHADOW OAK DR.
CASSELBERRY, FL 32707 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:** WALTER J HARRIS SR

02/23/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

| | | | |
|-----------------|----------------------|-----------------|-----------------------|
| Title | VP | Title | D |
| Name | HARRIS, SHARON F | Name | CHANDERSINGH, KAREN |
| Address | 323 SHADOW OAK DR. | Address | 323 SHADOW OAK DR. |
| City-State-Zip: | CASSELBERRY FL 32707 | City-State-Zip: | CASSELBERRY FL 32707 |
| Title | D | Title | PASTOR, PRESIDENT |
| Name | KNIGHT , TABITHA S | Name | HARRIS, SR , WALTER J |
| Address | 323 SHADOW OAK DR. | Address | 323 SHADOW OAK DR. |
| City-State-Zip: | CASSELBERRY FL 32707 | City-State-Zip: | CASSELBERRY FL 32707 |

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.

SIGNATURE: HARRIS, SR, WALTER J

PASTOR/PRESIDENT

02/23/2021

Electronic Signature of Signing Officer/Director Detail

Date