

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004962

Entity Name: LIVING WORD CHRISTIAN CENTER INTERNATIONAL MINISTRIES, INC.**Current Principal Place of Business:**7493 WEST SAMPLE ROAD
CORAL SPRINGS, FL 33065**Current Mailing Address:**7493 WEST SAMPLE ROAD
CORAL SPRINGS, FL 33065 US**FEI Number: 65-0971051****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**WALTERS, ORAL S
3906 SANCTUARY DRIVE
CORAL SPRINGS, FL 33065 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name WALTERS, ORAL S
Address 3906 SANCTAURY DRIVE
City-State-Zip: CORAL SPRINGS FL 33065

Title TREASURER
Name WALTERS, SANDRA J
Address 3906 SANCTAURY DRIVE
City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR
Name PLUMMER, MARCIA
Address 4970 SW 6TH STREET
City-State-Zip: MARGATE FL 33068

Title DIRECTOR
Name YOUNG, MARCIA V
Address 8277 NW 2ND MANOR
City-State-Zip: CORAL SPRINGS FL 33071

Title SECRETARY
Name LAKE, SHAILILAH
Address 8401 W SAMPLE ROAD
 #22
City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR
Name BENT, BRIAN
Address 6118 NW 62ND TER.
City-State-Zip: PARKLAND FL 33067

Title DIRECTOR
Name BENT, NOVIA
Address 6118 NW 62ND TER.
City-State-Zip: PARKLAND FL 33067

Title DIRECTOR
Name DAY, JOSEPH
Address 7153 NW 40TH ST
City-State-Zip: CORAL SPRINGS FL 33065

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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: ORAL ST.P. WALTERS**PRESIDENT****04/29/2019**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HUMPHREY, LEBA
Address 4342 NW 40TH TER.
City-State-Zip: COCONUT CREEK FL 33073

Title DIRECTOR
Name IHESIULO, PRINCE
Address 2864 CORAL SPRINGS DR
City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR
Name JORDAN, LORENZO
Address 3905 NW 89TH WAY
City-State-Zip: CORAL SPRINGS FL 33065