

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770114

FILED
Jul 16, 2004
Secretary of State

Entity Name: WORLD HEALING CENTER CHURCH, INC.

Current Principal Place of Business:

3400 WILLIAM D TATE AVE.
GRAPEVINE, TX 760514337

New Principal Place of Business:

Current Mailing Address:

PO BOX 168487
IRVING, TX 75016

New Mailing Address:

FEI Number: 59-2457046

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELSBERRY, MICHAEL
215 N EOLA DR
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HINN, BENEDICTUS,
Address: 3400 WILLIAM D. TATE AVE
City-St-Zip: GRAPEVINE, TX 760514337

Title: D () Delete
Name: SWAD, BILL
Address: 8200 CREEKHOLLOW RD
City-St-Zip: BLACKLICK, OH 43004

Title: S () Delete
Name: BROCK, STEVE
Address: 3250 MANOR VIEW CT
City-St-Zip: DACULA, GA 30019

Title: T () Delete
Name: HINN, BENEDICTUS
Address: 3400 WILLIAM D TATE AVE
City-St-Zip: GRAPEVINE, TX 760514337

Title: D () Delete
Name: SWAD, BILL
Address: 8200 CREEKHOLLOW ROAD
City-St-Zip: BLACKLICK, OH 43004

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: SWAD, BILL
Address: 8200 CREEKHOLLOW ROAD
City-St-Zip: BLACKLICK, OH 43004

Title: SD (X) Change () Addition
Name: INELLO, ROBERT
Address: 187 BASS POINT ROAD
City-St-Zip: NAHANT, MA 01908

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

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

Title: D () Change (X) Addition
Name: WEAD, DOUG
Address: 10570 SALLGRASS PLACE
City-St-Zip: HAYMARKET, VA 20169

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT INELLO

S/D

07/16/2004

Electronic Signature of Signing Officer or Director

Date