

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 29, 2004 8:00 am
Secretary of State

03-29-2004 90394 042 ****70.00

DOCUMENT # N97000000512

1. Entity Name

BY THE WORD OF FAITH CHURCH, INC.



Principal Place of Business

558 28TH STREET SOUTH
PARCEL #23/31/161/17298
SAINT PETERSBURG FL 33712
US

Mailing Address

558 28TH STREET SOUTH
008/0090 558 28TH ST, SO
ST PETERSBURG FL 33712
US

2. Principal Place of Business **BY THE WORD OF FAITH CHURCH INC**
Suite, Apt. #, etc. **558 28th St, SO**
PARCEL # 23/31/161/17298

3. Mailing Address **558 28th St**
St. Peter's Church
Suite, Apt. #, etc. **008/0090 558**
28th St. South



MOORE

CR2E037 (11/03)

City & State
ST. PETERSBURG FLA

City & State
ST. PETERSBURG

4. FEI Number
59-3424347

Applied For
Not Applicable

Zip
33712

Country
PINELLAS

Zip
FLA

Country
PINELLAS

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

SANDS, WILLIE
3537 BEACH DR SOUTHEAST
SAINT PETERSBURG FL 33705

7. Name and Address of New Registered Agent

Name **WILLIE SANDS**

Street Address (P.O. Box Number is Not Acceptable)

3537 BEACH DR SOUTHEAST

City **ST. PETERSBURG**

FL

Zip Code
33705

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **PRESIDENT / PASTOR ELDER: WILLIE SANDS / Willie Sands**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3-24-04

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE **AP**
NAME **SANDS, WILLIE** ☐ Delete
STREET ADDRESS **558 28TH STREET SOUTH**
CITY-ST-ZIP **SAINT PETERSBURG FL 33712**

TITLE **S**
NAME **JONES, LORENZO** ☐ Delete
STREET ADDRESS **558 28TH STREET SOUTH**
CITY-ST-ZIP **SAINT PETERSBURG FL 33712**

TITLE **VD**
NAME **TEAGLE, ROBERT** ☐ Delete
STREET ADDRESS **558 28TH STREET SOUTH**
CITY-ST-ZIP **SAINT PETERSBURG FL 33712**

TITLE **TT**
NAME **CARTY, GEORGE** ☒ Delete
STREET ADDRESS **558 28TH STREET, SO**
CITY-ST-ZIP **ST PETERSBURG FL 33712**

TITLE **MD**
NAME **TOBY, MICHAEL** ☐ Delete
STREET ADDRESS **558 28TH STREET, SO**
CITY-ST-ZIP **ST PETERSBURG FL 33712**

TITLE **CD**
NAME **WIGGINS, RICHARD** ☐ Delete
STREET ADDRESS **558 28TH STREET SOUTH**
CITY-ST-ZIP **SAINT PETERSBURG FL 33712**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **TRUSTEE**
STREET ADDRESS **JONES, LORENZO**
CITY-ST-ZIP **558 28TH STREET SOUTH**
ST. PETERSBURG FLA 33712

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Pastor Elder: Willie Sands**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-24-04

Date

127-328-0788

Daytime Phone #