

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002845

FILED
Mar 04, 2009
Secretary of State

Entity Name: WAY OF LIFE WORSHIP AND ARTS MINISTRIES INTERNATIONAL INC.

Current Principal Place of Business:

5431 STRATFIELD DR.
ORLANDO, FL 32821

New Principal Place of Business:

Current Mailing Address:

5431 STRATFIELD DR.
ORLANDO, FL 32821

New Mailing Address:

FEI Number: 59-3579348

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, STEVEN
5431 STRATFIELD DR.
ORLANDO, FL 32821 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: GONZALEZ, STEVEN
Address: 5431 STRATFIELD DR
City-St-Zip: ORLANDO, FL 32821

Title: VD () Delete
Name: GONZALEZ, ESTEBAN D
Address: 14013 FAIRWAY ISLAND DR. APT. 411
City-St-Zip: ORLANDO, FL 32837

Title: TD () Delete
Name: CAMACHO, HUGO
Address: 28945 SW 187TH AVENUE
City-St-Zip: HOMESTEAD, FL 33030

Title: SD () Delete
Name: OSBORNE, CHLOE E
Address: 14013 FAIRWAY ISLAND DR. APT. 411
City-St-Zip: ORLANDO, FL 32837

Title: D () Delete
Name: GONZALEZ, ELIZABETH S
Address: 5431 STRATFIELD DR.
City-St-Zip: ORLANDO, FL 32821

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: GONZALEZ, ESTEBAN D
Address: 14340 COLONIAL GRAND BLVD. APT 3309
City-St-Zip: ORLANDO, FL 32837

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

Title: SD (X) Change () Addition
Name: GONZALEZ, CHLOE E
Address: 14340 COLONIAL GRAND BLVD. APT 3309
City-St-Zip: ORLANDO, FL 32837

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: STEVEN GONZALEZ

PD

03/04/2009

Electronic Signature of Signing Officer or Director

Date