2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2005 08:00 AM
Secretary of State

DOCUMENT # N99000005488

1. Entity Name
THE WORD PLUS, INC.

Principal Place of Business
7954 ROYAL BIRKDALE CIR.
BRADENTON, FL 34202

Mailing Address
7954 ROYAL BIRKDALE CIR.
BRADENTON, FL 34202

04012005 No Chg-NP CR2E037 (10/03)

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4. FEI Number
65-0967209
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

WILLIAMS, VERSA CAROLYN
7954 ROYAL BIRKDALE CIR.
BRADENTON, FL 34202

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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE

Filing Fee Is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

100000287754
04/04/05-80081-016 61.25

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	WILLIAMS, VERSA CAROLYN
STREET ADDRESS	7954 ROYAL BIRKDALE CIR.
CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	DV
NAME	WILLIAMS, BRUCE L
STREET ADDRESS	7954 ROYAL BIRKDALE CIR.
CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	D
NAME	STEM, BARBARA L
STREET ADDRESS	7954 ROYAL BIRKDALE CIR.
CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	D
NAME	WILLIAMS, BRIAN L REV
STREET ADDRESS	7954 ROYAL BIRKDALE CIR.
CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	D
NAME	WILLIAMS, BRENDA L
STREET ADDRESS	7954 ROYAL BIRKDALE CIR.
CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	DST
NAME	CASHELL, KAREN M
STREET ADDRESS	7954 ROYAL BIRKDALE CIR.
CITY-ST-ZIP	BRADENTON, FL 34202

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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: Karen M Cashell Karen M. Cashell 4/1/05 (941) 429-5114
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #