## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 702088**

FILED Jan 08, 2009 Secretary of State

Entity Name: WORLD FOR CHRIST CRUSADE INC

Current Principal Place of Business:		New Principal Place of Business:		
	GOMEZ AVE UND, FL 334	55		
Current Mailing Address:		New Mailing Address:		
	ON VALLEY R LFORD, NJ 0			
FEI Number	: 22-6063975	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
	CARY GOMEZ AVE UND, FL 334:	55 US		
		submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
in the Stat	e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
in the Stat	e of Florida. RE:	submits this statement for the		ed office or registered agent, or both,  Date
in the Stat	e of Florida. RE:	nic Signature of Registered Ac	gent	
in the Stati SIGNATU OFFICER Title: Name: Address:	e of Florida.  RE: Electro  S AND DIRECTED  PD (	nic Signature of Registered Ac CTORS: ) Delete REV. WILL, IAM 'ALLEY RD	gent	Date
in the Stat	e of Florida.  RE: Electro  S AND DIRECTO  PD ( STELPSTRA, 1005 UNION V W MILFORD,	nic Signature of Registered Acc CTORS:  ) Delete REV. WILL, IAM 'ALLEY RD NJ ) Delete DA, 'ALLEY RD.	gent  ADDITIONS/CHANG  Title:  Name:  Address:	Date ES TO OFFICERS AND DIRECTOR
in the Stati SIGNATU  OFFICER  Title: Name: Address: City-St-Zip: Title: Name: Address:	e of Florida.  RE: Electro  S AND DIRECT  PD ( STELPSTRA, I 1005 UNION V W MILFORD, I V ( STORMS, LINI 1005 UNION V WEST MILFOR	nic Signature of Registered Age CTORS:  ) Delete REV. WILL, IAM CALLEY RD NJ  ) Delete DA, CALLEY RD. RD, NJ  ) Delete ANNA, CALLEY RD	gent  ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date SES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition

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: REV. WILLIAM STELPSTRA PD 01/08/2009