## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#719322**

FILED Jan 29, 2009 Secretary of State

Entity Name: WORD OF FAITH BIBLE CHURCH, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	R LATE RD IT CITY, FL 32112	US	179 CLEAR LAKE RI CRESCENT CITY, FI		
Current M	ailing Address:		New Mailing Addres	ss:	
	R LATE RD IT CITY, FL 32112	US	179 CLEAR LAKE RI CRESCENT CITY, FI		
FEI Number:	59-1881680 FEI N	lumber Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of Current	Registered Agent:	Name and Address	of New Registered Agent:	
114 J WAĹ CRESCEN The above	CHARLES B TON ROAD IT CITY, FL 32112  named entity submits of Florida.	US s this statement for the pur	pose of changing its register	ed office or registered agent, or both,	
SIGNATUF	RE:				
	Electronic Sigr	nature of Registered Agent		Date	
OFFICERS	AND DIRECTORS	:	ADDITIONS/CHANG	SES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	T () Delete NICHOLS, CHARLES B 114 J WALTON ROAD CRESCENT CITY, FL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	P () Delete COX, HOWARD, 179 CLEAR LAKE RD CRESCENT CITY, FL	32112	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD ( ) Delete DALE, PAT 115 LAKEVIEW AVE GEORGETOWN, FL 32	2139	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete COX, DAVID 1501 PINE ST BRBERVILLE, FL 3210	95	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete COX, LULA 1501 PINE ST BARBERVILLE, FL 32	112	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () Delete THOMPSON, TED 651 GEORGETOWN R CRESCENT CITY, FL		Title: Name: Address: City-St-Zip:	() 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: CHARLES B. NICHOLS TREA 01/29/2009