FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

DOCUMENT # **832992** **(2)**

1. Corporation Name

WORD AND FAITH, INC.

Principal Place of Business	Mailing Address
311 S. BLUFF DR. MELBOURNE FL 32901	311 S. BLUFF DR. MELBOURNE FL 32901

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **09/05/1974**
3a. Date of Last Report: **01/19/1994**
4. FEI Number: **23-7412989** ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund (See Instr.) ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
8. Did corporation have liability for intangible tax under S. 199.032, Florida Statutes? ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. # etc. 22	Suite, Apt. # etc. 27
City & State 23	City & State 28
Zip 24 / County 25	Zip 29 / County 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
VON RIESEN, LOREN 311 S. BLUFF DR. MELBOURNE FL 32901	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.1905, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.325, Florida Statutes.

SIGNATURE

12. OFFICERS AND/OR DIRECTORS		13. ADDITIONAL OFFICERS AND/OR DIRECTORS
01 Title	DR	☐ Change ☐ Addition
Name	VON RIESEN, LOREN	
Street Address	311 S. BLUFF DR.	
City-St-Zip	MELBOURNE FL	
02 Title	DR	☐ Change ☐ Addition
Name	VON RIESEN, FAWN	
Street Address	311 S. BLUFF DR.	
City-St-Zip	MELBOURNE FL	
03 Title	DR	☐ Change ☐ Addition
Name	PAYNE, TERI	
Street Address	311 S. BLUFF DR.	
City-St-Zip	MELBOURNE FL	
04 Title	DR	☐ Change ☐ Addition
Name	VON RIESEN, DORIS	
Street Address	311 S. BLUFF DR.	
City-St-Zip	MELBOURNE FL	
05 Title		☐ Change ☐ Addition
Name		
Street Address		
City-St-Zip		
06 Title		☐ Change ☐ Addition
Name		
Street Address		
City-St-Zip		

14. I hereby certify that the information supplied with this filing, pursuant to Florida Statutes, is true and accurate and that my signature shall serve 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or added on an attached sheet.

SIGNATURE: *Loren Von Riesen* 4-20-95 725-3673
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL DATE TELEPHONE NUMBER

0038102