


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 16, 2008 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # N00000004503 |  |
| 1. Entity Name PRELUDE WORLDWIDE MINISTRIES INC. | |

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|---|---|
| Principal Place of Business 1711 WORTHINGTON RD. SUITE 108 WEST PALM BEACH, FL 33409 | Mailing Address 1711 WORTHINGTON RD. SUITE 108 WEST PALM BEACH, FL 33409 |
|---|---|



01122008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

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| 4. FEI Number 65-1021656 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

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| 6. Name and Address of Current Registered Agent KOCH, MARILYN 2760 WHITEWING LANE WEST PALM BEACH, FL 33409 |
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IN THIS SPACE**

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

**Filing Fee is \$61.25
Due by May 1, 2008**

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

000000786222
01/17/08-80032-002 61.25

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D KOCH, MARK W 1711 WORTHINGTON RD. SUITE 108 WEST PALM BEACH, FL 33409 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D ILITCH, MICHAEL 1711 WORTHINGTON RD. WEST PALM BEACH, FL 33409 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D KOCH, STEPHANIE 1711 WORTHINGTON RD. WEST PALM BEACH, FL 33409 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D WILES, JOHN 1711 WORTHINGTON RD. WEST PALM BEACH, FL 33409 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: JOHN W. WILES III 1/12/08 561-686-5762
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #