



**FILED**  
**Apr 14, 2005 8:00 am**  
**Secretary of State**

<b>DOCUMENT # N00000005651</b> 1. Entity Name <b>WORD OF LIFE CHANGING MINISTRIES, INC.</b>				<b>State of Florida</b> 04-14-2005 90091 017 ****70.00	
Principal Place of Business 1041 N. DAVIS AVE LAKELAND, FL 33810		Mailing Address 1041 N. DAVIS AVE LAKELAND, FL 33810			
2. Principal Place of Business <b>737 N. Wabash Ave</b>		3. Mailing Address <b>7919 Indian Heights Dr.</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03312005 Chg-NP CR2E037 (10/03)	
City & State <b>Lakeland, Fla.</b>		City & State <b>Lakeland, Fla.</b>		4. FEI Number <b>59-3679783</b>	
Zip <b>33810</b>		Country <b>USA</b>		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>BURNEY, RUDOLPH V 7919 INDIAN HEIGHTS DRIVE LAKELAND, FL 33810</b>				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				<b>FL</b> Zip Code	
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 <b>Joyce A. Burney AD</b> (NOTE: Registered Agent signature required when reinstating) DATE					
<b>Filing Fee is \$61.25 Due by May 1, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
<b>D BURNEY, RUDOLPH V 7919 INDIAN HEIGHTS DRIVE LAKELAND, FL 33810</b> <input type="checkbox"/> Delete					
<b>AD BURNEY, JOYCE S 7919 INDIAN HEIGHTS DRIVE LAKELAND, FL 33810</b> <input type="checkbox"/> Delete					
<b>T GOODMAN, PATSY 622 MOHAWK AVE LAKELAND, FL 33815</b> <input checked="" type="checkbox"/> Delete			<b>Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/></b> <b>D Vivien Morris 207 W. 1st. St. Lakeland, Fla 33805 Trustee</b>		
<b>T BOATWRIGHT, MARVA 1121 WEST 9TH ST LAKELAND, FL 33805</b> <input checked="" type="checkbox"/> Delete			<b>Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/></b> <b>Joyce Monson 1503 N. Webster Lakeland, Fla 33805 Trustee</b>		
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: <b>Joyce A. Burney</b> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date Daytime Phone #					