

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 17, 2003 8:00 am
Secretary of State

02-17-2003 90284 019 ****70.00

DOCUMENT # N00000005651

1. Entity Name

WORD OF LIFE CHANGING MINISTRIES, INC.



Principal Place of Business

1119 APOLLO CT 743 N. Wabash Ave
LAKELAND FL 33810

Mailing Address

1119 APOLLO CT 743 N. Wabash Ave
LAKELAND FL 33810

10023082



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

743 N. Wabash Ave

3. Mailing Address

743 N. Wabash Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Lakeland, FL 33810

City & State

Lakeland, FL 33810

Zip

33810

Country

Polk

Zip

33810

Country

Polk

4. FEI Number 59-3679783

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BURNEY, RUDOLPH V

1119 APOLLO CT 7919 Indian Heights Drive
LAKELAND FL 33810

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

Lakeland

FL

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 X Rudolph V. BURNEY

Signature, typed or printed name of registered agent and title if applicable.

X Pastor Rudolph V. Burney 2-8-03
(NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	BURNEY, RUDOLPH V	
STREET ADDRESS	1119 APOLLO CT 7919 Indian Hts Dr	
CITY-ST-ZIP	LAKELAND FL 33810	
TITLE	AD	<input type="checkbox"/> Delete
NAME	BURNEY, JOYCE S	
STREET ADDRESS	1119 APOLLO CT 7919 Indian Hts Dr	
CITY-ST-ZIP	LAKELAND FL 33810	
TITLE	T	<input type="checkbox"/> Delete
NAME	GOODMAN, PATSY	
STREET ADDRESS	1139 MERCURY DR. W. #D	
CITY-ST-ZIP	LAKELAND FL 33810	
TITLE	T	<input type="checkbox"/> Delete
NAME	BOATWRIGHT, MARVA	
STREET ADDRESS	1123 APOLLO CT.	
CITY-ST-ZIP	LAKELAND FL 33810	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	7919 Indian Heights Drive	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	7919 Indian Heights Drive	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: X Pastor Rudolph V. Burney 2-8-02

CR2E037 (10/02)