2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000006870

FILED Apr 28, 2005 Secretary of State

Entity Name: WORD AND SPIRIT COMMUNITY CHRISTIAN CENTER, INC.

urrent P	rincipal Place	of Business:	New Principal Plac	e of Business:
	ONET DR. A, FL 32725			
urrent N	lailing Addres:	s:	New Mailing Addre	ss:
O. BOX ELTONA	5358 x, FL 32728		1516 CORONET DR DELTONA, FL 3272	
El Number	: 59-3676143	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	l Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
516 COR	, YVONNE R CONET DR. A, FL 32725	JS		
	named entity s e of Florida.	ubmits this statement for the	purpose of changing its register	red office or registered agent, or both,
the State	e of Florida.	ubmits this statement for the	purpose of changing its register	red office or registered agent, or both,
the State	e of Florida. RE:	ubmits this statement for the		red office or registered agent, or both, Date
the State	e of Florida. RE:	c Signature of Registered Ag	ent	
the State	e of Florida. RE: Electroni S AND DIRECT	c Signature of Registered Ag F ORS: Delete NIO L DR.	ent	Date
the State IGNATUI FFICER: tle: ame: ddress:	e of Florida. RE: Electroni S AND DIRECT PD () CHURCH, ANTO 1516 CORONET DELTONA, FL 3	c Signature of Registered Ag ORS: Delete NIO L DR. 2725 Delete NE R DR.	ent ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR
the State GNATUI FFICERS le: ime: dress: ty-St-Zip: le: ime: dress:	e of Florida. RE: Electroni S AND DIRECT PD () CHURCH, ANTO 1516 CORONET DELTONA, FL 3 VD () CHURCH, YVON 1516 CORONET DELTONA, FL 3	c Signature of Registered Ag FORS: Delete NIO L DR. 2725 Delete NE R DR. 2725 Delete	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ANTONIO L. CHURCH PD 04/28/2005