## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000007770

City-St-Zip:

LAKELAND, FL 33813

Entity Name: WALK IN LIGHT MINISTRIES, INC.

FILED Apr 26, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** ATTN: KIMBERLY JOHNSON 1923 CASCO ST. LAKELAND, FL 338012414 **Current Mailing Address: New Mailing Address:** ATTN: KIMBERLY JOHNSON 1923 CASCO ST. LAKELAND, FL 338012414 FEI Number: 59-3687852 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JOHNSON, KIMBERLY R 1923 CASCO ST LAKELAND, FL 33801 US 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete PTD () Change () Addition JOHNSON, KIMBERLY R REV Name: Name: 1923 CASCO ST Address: Address: City-St-Zip: LAKELAND, FL 338012414 City-St-Zip: Title: VD () Delete Title: () Change () Addition Name: JOHNSON, ROBERT S Name: Address: 1923 CASCO ST Address: City-St-Zip: LAKELAND, FL 338012414 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition OSMUN, WILLIAM G Name: CARTER, SUSAN REV Name: 1001 CARPENTER'S WAY L-222 Address: Address: 6438 71ST ST N City-St-Zip: LAKELAND, FL 33809 City-St-Zip: PINELLAS PARK, FL 33781 Title: SO ( ) Delete Title: () Change () Addition Name: MUNDY, JUDITH REV Name: 932 HOLLINGSWORTH ROAD Address: Address: City-St-Zip: LAKELAND, FL 33801 City-St-Zip: Title: (X) Delete Title: () Change () Addition HALL, TIMOTHY Name: Name: 3233 MERLOT Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

City-St-Zip:

SIGNATURE: KIMBERLY R JOHNSON PTD 04/26/2006