

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2005 8:00 am
Secretary of State

02-14-2005 90069 012 ****61.25

DOCUMENT # N01000004457					
1. Entity Name WORD OF FAITH MINISTRIES OF FORT WALTON BEACH, INC.					
Principal Place of Business 511 N. EGLIN PKWY FORT WALTON BEACH, FL 32547 US			Mailing Address P O BOX 146 FORT WALTON BEACH, FL 32549 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		02082005 Chg-NP CR2E037 (10/03)
4. FEI Number 59-3700135				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
JOHNSON, NATHANIEL 511 N. EGLIN PKWY FT WALTON BEACH, FL 32547			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <input type="checkbox"/> Delete JOHNSON, NATHANIEL 112 SLEEPY OAKS ROAD N.W. FT WALTON BEACH, FL 32548		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input checked="" type="checkbox"/> Delete HEINS, PHILLIP 904 JUNIPER AVE NICEVILLE, FL 32578		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition MARY JOCKSON 1863 HEARTLAND DRIVE FORT WALTON BEACH, FL 32547	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <input type="checkbox"/> Delete RUGGS, HUBERT 17 BERWICK CIRCLE SHALIMAR, FL 32579		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/S/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition RUGGS, HUBERT	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <input checked="" type="checkbox"/> Delete JACKSON, DAWN 9808 EMMA WAY NAVARRE, FL 32566		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition DOLLIE DUGH 319 CHICAGO AVE VEG/PARADISE, FL 32580	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete JOHNSON, BARBARA 112 SLEEPY OAKS ROAD N.W. FT. WALTON BEACH, FL 32548		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition JOHNSON, BARBARA	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <u>Hubert Ruggs</u>		HUBERT RUGGS		8 FEB 2005	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		850 651-8350	
<small>Daytime Phone #</small>					