

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005724

FILED
Jul 05, 2007
Secretary of State

Entity Name: WORD OF LIFE COMMUNITY CHURCH OF SOUTHWEST FLORIDA, INC.

Current Principal Place of Business:

3700 BAILES STREET
BONITA SPRINGS, FL 34134

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 2273
BONITA SPRINGS, FL 34133

New Mailing Address:

309 HORTON GROVE ROAD
FORT MILL, SC 29715

FEI Number: 65-1146478 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WHITE, H. ALLEN
3700 BAILES STREET
BONITA SPRINGS, FL 34134 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:

Title: D () Delete
Name: WHITE, H. ALLEN
Address: 3700 BAILES STREET
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D () Delete
Name: WHITE, SHERYL A
Address: 3700 BAILES STREET
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D () Delete
Name: SCHLABACH, STEPHEN A
Address: 6664 DUCK POND LANE
City-St-Zip: SARASOTA, FL 34240

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: H. ALLEN WHITE

D

07/05/2007

Electronic Signature of Signing Officer or Director

Date