

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # N01000007357

1. Entity Name
RHEMA A READY WORD MINISTRIES, INC.



Principal Place of Business
**2307 N.W. 61ST STREET
MIAMI, FL 33142**

Mailing Address
**2307 N.W. 61ST STREET
MIAMI, FL 33142**



01052006 No Chg-NP CR2E037 (11/05)

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4. FEI Number
55-0798265

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BROWN, JAMES E
2307 N.W. 61ST STREET
MIAMI, FL 33142**

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IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution.

N/A
**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PO
NAME	BROWN, JAMES E
STREET ADDRESS	2307 N.W. 61ST STREET
CITY-ST-ZIP	MIAMI, FL 33142
TITLE	SD
NAME	BROWN, ALICIA M
STREET ADDRESS	2307 N.W. 61ST STREET
CITY-ST-ZIP	MIAMI, FL 33142
TITLE	FAD
NAME	CARTY, JOHNDALE
STREET ADDRESS	8801 S CRESCENT DR
CITY-ST-ZIP	MIRAMAR, FL 33014
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/25/06-80047-004 70.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: James E Brown
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-6-06 (786) 200-3019
Date Daytime Phone #