2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 01, 2006
Secretary of State

DOCUMENT# N02000006317

Entity Name: JESUS THE LIVING WORD PRAISE & WORSHIP MINISTRIES, INC.

Current Principal Place of Business:

1760 NW 189TH TERRACE
OPA LOCKA, FL 33056

New Principal Place of Business:

Current Mailing Address:

1760 NW 189TH TERRACE
OPA LOCKA, FL 33056

New Mailing Address:

FEI Number: 82-0561830 **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:

WILLIAMS, NOEL D
1760 NW 189TH TERRACE
OPA LOCKA, FL 33056 US

Name and Address of New Registered Agent:

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: PD ( ) Delete
Name: WILLIAMS, NEVILLE
Address: 1760 NW 189TH TERRACE
City-St-Zip: MIAMI GARDENS, FL 33056

Title: VD ( ) Delete
Name: WILLIAMS, NOEL
Address: 1760 NW 189TH TERRACE
City-St-Zip: MIAMI GARDENS, FL 33056

Title: SD ( ) Delete
Name: MCCLELLAN, APRIL
Address: P.O. BOX 611433
City-St-Zip: MIAMI, FL 33179

Title: TD ( ) Delete
Name: HOWARD, GARRETT
Address: 15211 NW 18TH AVE
City-St-Zip: MIAMI GARDENS, FL 33056

Title: D ( ) Delete
Name: BASS, MATTHEW
Address: 20147 NW 58TH PLACE
City-St-Zip: MIAMI, FL 33015

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:

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 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: NOEL WILLIAMS VP 06/01/2006

Electronic Signature of Signing Officer or Director — Date