2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 18, 2005 8:00 am
Secretary of State
04-22-2005 90297 023 ****70.00

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1. Entity Name

MIRACLE WORD OF FAITH MINISTRIES INC.

66017658

1st MOORE CR2E037 (10/04)

Principal Place of Business	Mailing Address
3809-A EAST UNIVERSITY AVE GAINESVILLE FL 32641	P.O. BOX 3202 HIGH SPRINGS FL 32655

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 48-1295756 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HORNE, QUEEN E 405 S.E. RAIL ROAD AVENUE HIGH SPRINGS FL 32643	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25 Due By May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	D AARON, PHENIX E 192 SOUTH ELOISE ST LAKE CITY FL 32025	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Phenix E. Aaron - Director 192 South Eloise St. D Lake City Fla. 32025	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HORNE, QUEEN E 405 SE RR AVE HIGH SPRINGS FL 32643	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Queen E. Horne - President 405 S.E. R.R. Ave High Springs Fla 32643	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S PLEASANT, PATRICIA 540 NW 26TH AVE GAINESVILLE FL 32609	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Patricia Pleasant - Secretary + Treasury 540 N.W. 26th Ave Gainesville Fla 32609	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ 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: Queen E. Horne QUEEN E. HORNE 4-19-05 386-454-5671 352-317-2540
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #