

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90309 049 ****70.00

DOCUMENT # N03000000456

1. Entity Name

MIRACLE WORD OF FAITH MINISTRIES INC.



Principal Place of Business

3809-A EAST UNIVERSITY AVE
GAINESVILLE FL 32641

Mailing Address

P.O. BOX 3202
HIGH SPRINGS FL 32655

60024826



2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

P.O. Box 140752

Suite, Apt. #, etc.

City & State

Gainesville FL2

Zip

32614

Country

Alachua

1st MOORE

CR2E037 (10/05)

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

HORNE, QUEEN E
405 S.E. RAIL ROAD AVENUE
HIGH SPRINGS FL 32643

7. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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

TITLE D ☐ Delete
NAME AARON, PHENIX E
STREET ADDRESS 192 SOUTH ELOISE ST
CITY-ST-ZIP LAKE CITY FL 32025

TITLE P ☐ Delete
NAME HORNE, QUEEN E
STREET ADDRESS 405 SE RR AVE
CITY-ST-ZIP HIGH SPRINGS FL 32643

TITLE S ☐ Delete
NAME PLEASANT, PATRICIA
STREET ADDRESS 540 NW 26TH AVE
CITY-ST-ZIP GAINESVILLE FL 32609

TITLE D ☐ Delete
NAME AARON, PHENIX E
STREET ADDRESS 192 S ELOISE ST
CITY-ST-ZIP LAKE CITY FL 32025

TITLE P ☐ Delete
NAME HORNA, QUEEN E
STREET ADDRESS 405 SE RR AVE
CITY-ST-ZIP HIGH SPRINGS FL 32643

TITLE S ☐ Delete
NAME PLEASANT, PATRICIA
STREET ADDRESS 540 NW 26TH AVE
CITY-ST-ZIP GAINESVILLE FL 32609

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Phenix E. Aaron - Director ☐ Change ☒ Addition
NAME
STREET ADDRESS 192 South Eloise Street (D)
CITY-ST-ZIP Lake city FL2-32025

TITLE Queen E. Horne - president ☐ Change ☒ Addition
NAME
STREET ADDRESS 405 S.E. R.R. AVE
CITY-ST-ZIP High Springs FL2-32643

TITLE Patricia Pleasant - Secretary ☐ Change ☒ Addition
NAME + Treasurer
STREET ADDRESS 540 N.W. 26th Ave
CITY-ST-ZIP Gainesville FL2. 32609

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Queen E. Horne
QUEEN E. HORNE

4-5-06

352-317-2540