

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002783

FILED  
Apr 30, 2007  
Secretary of State

**Entity Name:** WORD OF LIFE CENTERS, INTERNATIONAL, INC.

**Current Principal Place of Business:**

1024 MAIN STREET  
TITUSVILLE, FL 32796

**New Principal Place of Business:**

**Current Mailing Address:**

1024 MAIN STREET  
TITUSVILLE, FL 32796

**New Mailing Address:**

**FEI Number:** 56-2337581

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

THOMAS, VIVIAN  
1024 MAIN STREET  
TITUSVILLE, FL 32796 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: D ( ) Delete  
Name: MOSS, JAMAL  
Address: 1053 SOUTH PARK AVENUE  
City-St-Zip: TITUSVILLE, FL 32780

Title: D ( ) Delete  
Name: KELLY, RICHARD  
Address: 915 SOUTH PARK AVENUE APT 30  
City-St-Zip: TITUSVILLE, FL 32780

Title: D ( ) Delete  
Name: MOSS, ERIC  
Address: 4499 ASHLEY DR.  
City-St-Zip: TITUSVILLE, FL 32780

Title: P ( ) Delete  
Name: THOMAS, VIVIAN  
Address: 1660 RICE AVENUE  
City-St-Zip: TITUSVILLE, FL 32796

Title: VP ( ) Delete  
Name: THOMAS, EUGENE  
Address: 1660 RICE AVENUE  
City-St-Zip: TITUSVILLE, FL

Title: T ( ) Delete  
Name: MILDRED, GRANT  
Address: 1024 MAIN STREET  
City-St-Zip: TITUSVILLE, FL 32796

**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:

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: VIVIAN THOMAS

PRES

04/30/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date