

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006318

FILED  
Sep 02, 2008  
Secretary of State

**Entity Name:** LIGHTED WORD MINISTRIES, CORP.

**Current Principal Place of Business:**

1749 NW 39 ST  
OAKLAND PARK, FL 33309 US

**New Principal Place of Business:**

**Current Mailing Address:**

1749 NW 39 ST  
OAKLAND PARK, FL 33309 US

**New Mailing Address:**

**FEI Number:** 35-2224895 **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:**

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

DARLING, JESSICA M  
1749 NW 39 ST  
OAKLAND PARK, FL 33309 US

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: P, D ( ) Delete  
Name: FOSTER, LIVINGSTON  
Address: 3000 LOW KEY COURT  
City-St-Zip: KATHLEEN, GA 31047 US

Title: VP ( ) Delete  
Name: SNAPE, SHELDON  
Address: 1749 NW 39 ST  
City-St-Zip: OAKLAND PARK, FL 33309 US

Title: S, T ( ) Delete  
Name: DARLING, JESSICA M  
Address: 1749 NW 39 ST  
City-St-Zip: OAKLAND PARK, FL 33309 US

Title: T, S ( ) Delete  
Name: GAYLE, PATRICIA  
Address: 5372 GATE LAKE ROAD  
City-St-Zip: TAMARAC, FL 33319 US

Title: O,D ( ) Delete  
Name: FOSTER, ALTHEA  
Address: 9753 NW 43 ST  
City-St-Zip: SUNRISE, FL 33351 US

Title: O,D ( ) Delete  
Name: ARMSTRONG, HANDEL O  
Address: 5372 GATELAKE ROAD  
City-St-Zip: TAMARAC, FL 33319 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P, D (X) Change ( ) Addition  
Name: FOSTER, LIVINGSTON  
Address: 6030 NW 43 TERR  
City-St-Zip: FT. LAUDERDALE, FL 33319 US

Title: VP (X) Change ( ) Addition  
Name: SNAPE, SHELDON  
Address: 5372 GATE LAKE ROAD  
City-St-Zip: TAMARAC, FL 33319 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: O,D (X) Change ( ) Addition  
Name: FOSTER, ALTHEA  
Address: 6030 NW 43 TERR  
City-St-Zip: FT. LAUDERDALE, FL 33319 US

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: JESSICA M DARLING

S

09/02/2008

Electronic Signature of Signing Officer or Director

Date