

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007771

FILED  
Feb 25, 2005  
Secretary of State

**Entity Name:** KING'S WORD EMPLOYMENT SERVICES INC.

**Current Principal Place of Business:**

2510 SPRING PARK ROAD  
JACKSONVILLE, FL 32207 DU

**New Principal Place of Business:**

**Current Mailing Address:**

2510 SPRING PARK ROAD  
JACKSONVILLE, FL 32207

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

WILLIAMS, ROWLAND V  
1125-1 CESERY BLVD.  
JACKSONVILLE, FL 32211 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: CEOP ( ) Delete  
Name: HUGHES, CAROLYN W  
Address: 2510 SPRING PARK ROAD  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D ( ) Delete  
Name: HUGHES, CAROLYN W  
Address: 2510 SPRING PARK ROAD  
City-St-Zip: JACKSONVILLE, FL 32207

Title: CVTD ( ) Delete  
Name: HUGHES, KING D  
Address: 2510 SPRING PARK ROAD  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D ( ) Delete  
Name: BAKER, BARBARA D  
Address: 2623 PEPPER MILL COURT  
City-St-Zip: MIDDLEBURG, FL 32068

Title: D ( ) Delete  
Name: WILLIAMS, ROWLAND V  
Address: 1125-1 CESERY BLVD.  
City-St-Zip: JACKSONVILLE, FL 32211

**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 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 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: KING D HUGHES

CVTD

02/25/2005

Electronic Signature of Signing Officer or Director

Date