

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008759

FILED
Mar 23, 2009
Secretary of State

Entity Name: THE ANGLICAN CHURCH OF THE WORD, INC.

Current Principal Place of Business:

5648 WEST ATLANTIC BOULEVARD
MARGATE, FL 330634523

New Principal Place of Business:

7676 DAVIE ROAD EXTENSION
HOLLYWOOD, FL 33024

Current Mailing Address:

5648 WEST ATLANTIC BOULEVARD
MARGATE, FL 330634523

New Mailing Address:

7676 DAVIE ROAD EXTENSION
HOLLYWOOD, FL 33024

FEI Number: 06-1725358

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HESFORD, A. MARGARET ESQ.
5638 WEST ATLANTIC BOULEVARD
MARGATE, FL 330634523 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: PD () Delete
Name: EATON, WILLIAM REV.
Address: 978 SW 114TH TERRACE
City-St-Zip: DAVIE, FL 333254027

Title: VD () Delete
Name: HESFORD, A. MARGARET ESQ.
Address: 5648 WEST ATLANTIC BOULEVARD
City-St-Zip: MARGATE, FL 330634523

Title: SD () Delete
Name: DALY, S. KARL
Address: 16865 SW 1ST PLACE
City-St-Zip: PEMBROKE PINES, FL 330271095

Title: TD () Delete
Name: HYDE, DONALD
Address: 10660 SW 14TH COURT
City-St-Zip: DAVIE, FL 333247120

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DALY, CASS REV.
Address: 1100 COLONY POINT CIRCLE, BLDG 3, APT 401
City-St-Zip: PEMBROKE PINES, FL 33026

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

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

Title: TD (X) Change () Addition
Name: BROIHahn, MICHAEL
Address: 1240 NW 91 AVE
City-St-Zip: PEMBROKE PINES, FL 33024

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: MICHAEL BROIHahn

TD

03/23/2009

Electronic Signature of Signing Officer or Director

Date