

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008780

FILED
Apr 24, 2005
Secretary of State

Entity Name: THE A.C.O.J. WORD OF TRUTH INTERNATIONAL MINISTRIES, INC.

Current Principal Place of Business:

209 NW 7TH ST
POMPANO BEACH, FL 33060

New Principal Place of Business:

Current Mailing Address:

2781 NW 10TH PLACE
FT LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 51-0488268 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JENKINS, ALEX L DR
155145 93RD ST
WEST PALM BEACH, FL 33412 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: P () Delete
Name: THOMAS, ROBERT L
Address: 2781 NW 10TH PLACE
City-St-Zip: FT LAUDERDALE, FL 33311

Title: D (X) Delete
Name: JENKINS, ALEX L DR
Address: 15514 93RD ST N
City-St-Zip: WEST PALM BCH, FL 33412

Title: D () Delete
Name: JOHNSON, WILLIE M
Address: 209 NW 7TH ST
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: THOMAS, TERRY
Address: 209 NW 7TH ST
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: FLOYD, MICHAEL
Address: 209 NW 7TH ST
City-St-Zip: POMPANO BEACH, FL 33060

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: MICHAEL FLOYD

D

04/24/2005

Electronic Signature of Signing Officer or Director

_____ Date