

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010140

FILED  
Apr 09, 2007  
Secretary of State

Entity Name: WORD VINE CHRISTIAN FELLOWSHIP INC.

## Current Principal Place of Business:

2633 VAN GUNDY ROAD  
JACKSONVILLE, FL 32208

## New Principal Place of Business:

## Current Mailing Address:

11122 LORD TAYLOR DR.  
JACKSONVILLE, FL 32246

## New Mailing Address:

FEI Number: 37-1469994

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MINOR, LARRY W DR.  
11122 LORD TAYLOR DR.  
JACKSONVILLE, FL 32246 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: MINOR, LARRY W DR.  
Address: 11122 LORD TAYLOR DR.  
City-St-Zip: JACKSONVILLE, FL 32246

Title: D/S ( ) Delete  
Name: MINOR, BARBARA A DR.  
Address: 11122 LORD TAYLOR DR.  
City-St-Zip: JACKSONVILLE, FL 32246

Title: D/T ( ) Delete  
Name: WRIGHT, SIDNEY L REV.  
Address: 1451 WEST UNION ST.  
City-St-Zip: JACKSONVILLE, FL 32209

Title: D ( ) Delete  
Name: DEGRAFF, VERONICA  
Address: 8859 OLD KINGS ROAD APT.#407  
City-St-Zip: JACKSONVILLE, FL 32257

Title: D ( ) Delete  
Name: WHEELER, HAROLD  
Address: 11926 ARBOR LAKE DR.  
City-St-Zip: JACKSONVILLE, FL 32225

Title: D ( ) Delete  
Name: MINOR, JOSHUA I  
Address: 11122 LORD TAYLOR DRIVE  
City-St-Zip: JACKSONVILLE, FL 32246

## 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: D (X) Change ( ) Addition  
Name: JOHNSON, PERCY M DEC.  
Address: 1751 WEST 14TH STREET  
City-St-Zip: JACKSONVILLE, FL 32209

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 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: DR. LARRY W. MINOR

RA/P

04/09/2007

Electronic Signature of Signing Officer or Director

Date