


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 16, 2006 08:00 AM
Secretary of State

DOCUMENT # N04000002113		
1. Entity Name WORD SEEKERS INTERNATIONAL MINISTRIES, INC.		
Principal Place of Business 605 KINGS LANE SW WINTER HAVEN, FL 33880	Mailing Address PO BOX 9083 WINTER HAVEN, FL 33883-9083	



05312006 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 37-1419071	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MORAN I, SELWYN B 605 KINGS LANE SW WINTER HAVEN, FL 33880

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when restate) DATE _____

**Filing Fee is \$61.25
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	P MORAN I, SELWYN B 605 KINGS LANE SW WINTER HAVEN, FL 33880
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	P MORAN, GRETA E 605 KINGS LANE SW WINTER HAVEN, FL 33880
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D BAEHR, GEORGE 501 OAKRIDGE EAST LAKELAND, FL 33801
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
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08/16/06-80005-007 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Greta E. Moran 6/10/06 (833) 298-9685
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #