2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2008
Secretary of State

DOCUMENT# N04000002820

Entity Name: FIRE OF THE WORD FAITH CENTER CHURCH, INC.

Current Principal Place of Business:

4401 GEORGETOWN DR.
JACKSONVILLE, FL 32244

New Principal Place of Business:

Current Mailing Address:

4401 GEORGETOWN DR.
JACKSONVILLE, FL 32244

New Mailing Address:

FEI Number: 20-0839589 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WILLIAMS, STANLEY M
3608 MORNING MEADOW LN.
ORANGE PARK, FL 32073 US

Name and Address of New Registered Agent:

WILLIAMS, STANLEY M
4019 EAGLE LANDING PARKWAY
ORANGE PARK, FL 32065 US

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: _____ 02/11/2008
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WILLIAMS, STANLEY M
Address: 3608 MORNING MEADOW LANE
City-St-Zip: ORANGE PARK, FL 32073

Title: V ( ) Delete
Name: WILLIAMS, EUNICE D
Address: 3608 MORNING MEADOW LANE
City-St-Zip: ORANGE PARK, FL 32073

Title: S ( ) Delete
Name: WILLIAMS, EUNICE D
Address: 3608 MORNING MEADOW LN
City-St-Zip: ORANGE PARK, FL 32073

Title: O ( ) Delete
Name: BONAPARTE, JAMES E
Address: 5911 RIDGEWAY RD. E
City-St-Zip: JACKSONVILLE, FL 32244

Title: O ( ) Delete
Name: WALKER, GERALD
Address: 11314 MONUMENT LANDING BLVD.
City-St-Zip: JACKSONVILLE, FL 32205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WILLIAMS, STANLEY M
Address: 4019 EAGLE LANDING PARKWAY
City-St-Zip: ORANGE PARK, FL 32065

Title: V (X) Change ( ) Addition
Name: WILLIAMS, EUNICE D
Address: 4019 EAGLE LANDING PARKWAY
City-St-Zip: ORANGE PARK, FL 32065

Title: S (X) Change ( ) Addition
Name: WILLIAMS, EUNICE D
Address: 4019 EAGLE LANDING PARKWAY
City-St-Zip: ORANGE PARK, FL 32065

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 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: EUNICE D WILLIAMS S 02/11/2008
Electronic Signature of Signing Officer or Director — Date