

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 12, 2005 8:00 am
Secretary of State

01-12-2005 90001 013 ****70.00

DOCUMENT # N04000003502 1. Entity Name TRANSFORMING WORD OF GOD MINISTRIES INC.					
Principal Place of Business 5281 N ANDREWS AVE FT LAUDERDALE, FL 33309				Mailing Address 5281 N ANDREWS AVE FT LAUDERDALE, FL 33309	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 90-0162739	
Zip		Country		5. Certificate of Status Desired XX \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PIERCE, PEGGY 5281 N ANDREWS AVE FT LAUDERDALE, FL 33309				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agents, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when addressing.)					
Filing Fee is \$61.25 Due by May 1, 2005.		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fee	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete PIERCE, PEGGY MOORE 5281 N ANDREWS AVE FT LAUDERDALE, FL 33309	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition			
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 917, 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: <u>Peggy Moore Pierce</u> 01-10-2005 (954) 938-7574 Signature and typed or printed name of named officer or director. Date Daytime Phone #					