

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006403

FILED
Apr 09, 2009
Secretary of State

Entity Name: WORD OF FAITH CHRISTIAN MINISTRIES, INC.

Current Principal Place of Business:

1860 OLD OKEECHOBEE BLVD.
BLDG 200 STE 202
WEST PALM BEACH, FL 33409 US

New Principal Place of Business:

Current Mailing Address:

5769 AZALEA CIRCLE
WEST PALM BEACH, FL 33415 US

New Mailing Address:

FEI Number: 20-1311037

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, JONATHAN B
5769 AZALEA CIRCLE
WEST PALM BEACH, FL 33415 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: PRES () Delete
Name: BROWN, JONATHAN B
Address: 5769 AZALEA CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33415 US

Title: VP () Delete
Name: BROWN, PATRICKA D
Address: 5769 AZALEA CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33415 US

Title: SEC () Delete
Name: BROWN, LATASHA
Address: 2200 NORTH AUSTRALIAN AVE APT 105
City-St-Zip: WEST PALM BEACH, FL 33407 US

Title: TRUS () Delete
Name: RELLFORD, VERNA C
Address: 3654 VIA POINCIANA BLDG 3-301
City-St-Zip: LAKE WORTH, FL 33467 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: B (X) Change () Addition
Name: LEGGETT, ANNETTA
Address: 2030 NW 2ND COURT
City-St-Zip: BOYNTON BEACH, FL 33435 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: B () Change (X) Addition
Name: LANIER, TRACY
Address: 441 WEST 25TH STREET
City-St-Zip: RIVIERA BEACH, FL 33404 US

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: JONATHAN B. BROWN

PRES

04/09/2009

Electronic Signature of Signing Officer or Director

Date