2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006444

FILED May 02, 2007 Secretary of State

Entity Name: WORSHIP LEADERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 13829 DANIELS LANDING CIR WINTER GARDEN, FL 34787 US **Current Mailing Address: New Mailing Address:** 13829 DANIELS LANDING CIR WINTER GARDEN, FL 34787 US FEI Number: 20-1425174 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STEWARD, LARUE L PRES/D HOWARD, LARUE L PRES/D 13829 DANÍELS LANDING CIR 13829 DANIELS LANDING CIR WINTER GARDEN, FL 34787 US US WINTER GARDEN, FL 34787 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: LARUE HOWARD 05/02/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete STEWARD, LARUE L PRES/D HOWARD, LARUE L PRES/D Name: Name: 13829 DANIELS LANDING CIR Address: 13829 DANIELS LANDING CIR Address: City-St-Zip: WINTER GARDEN, FL 34787 US City-St-Zip: WINTER GARDEN, FL 34787 US Title: Title: () Delete () Change () Addition HALE, OUIDA Name: Name: Address: 13829 DANIELS LANDING CIR Address: City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: Title: () Delete Title: () Change () Addition DICICCIO, LOU Name: Name: Address: PO BOX 609105 Address: City-St-Zip: ORLANDO, FL 32860 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SAUNDERS, MICHAEL Name: Address: 726 LEGION DR Address: DESTIN, FL 32541 City-St-Zip: City-St-Zip: Title: VP,S () Delete Title: () Change () Addition LEEPER, NICOLE Name: Name: 300 ST CLAIRE CIR # C Address: Address: City-St-Zip: YORKTOWN, VA 23693 City-St-Zip: Title: () Delete Title: () Change () Addition HEMPHIL, GLORIA S TREAS Name: Name: Address: PHONETIA CT Address: DELTONA, FL 32738 City-St-Zip: 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: LARUE HOWARD PRES 05/02/2007