

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010237

FILED  
Feb 22, 2005  
Secretary of State

Entity Name: WORDS FOR LIFE INTL. MINISTRIES, INC.

**Current Principal Place of Business:**

4699 S. STATE ROAD 7  
R  
TAMARAC, FL 33313

**New Principal Place of Business:**

**Current Mailing Address:**

7481 SUNSET STRIP  
SUNRISE, FL 33313

**New Mailing Address:**

FEI Number: 20-2309799      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

BAKER, YVONNE L EVANG.  
7481 SUNSET STRIP  
SUNRISE, FL 33313      US

**Name and Address of New Registered Agent:**

BAKER, YVONNE L  
7481 SUNSET STRIP  
SUNRISE, FL 33313      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: YVONNE L BAKER

02/22/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BAKER, YVONNE L EVANG.  
Address: 7481 SUNSET STRIP  
City-St-Zip: SUNRISE, FL 33313

Title: D ( ) Delete  
Name: BAKER, RUTH-ANN P MISS  
Address: 7481 SUNSET STRIP  
City-St-Zip: SUNRISE, FL 33313

Title: D ( ) Delete  
Name: LAWRENCE, HOPE B MS.  
Address: 4441 NW 4TH STREET  
City-St-Zip: PLANTATION, FL 33317

Title: D ( ) Delete  
Name: BAKER, YVONNE L EVANG.  
Address: 7481 SUNSET STRIP  
City-St-Zip: SUNRISE, FL 33313

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: BAKER, YVONNE L  
Address: 7481 SUNSET STRIP  
City-St-Zip: SUNRISE, FL 33313

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

Title: D (X) Change ( ) Addition  
Name: CLARKE, SOPHIA MS.  
Address: 208 NW 43RD AVENUE  
City-St-Zip: PLANTATION, FL 33317

Title: D (X) Change ( ) Addition  
Name: BAKER, YVONNE L  
Address: 7481 SUNSET STRIP  
City-St-Zip: SUNRISE, FL 33313

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: YVONNE L BAKER

P

02/22/2005

Electronic Signature of Signing Officer or Director

Date