## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000003522

FILED Apr 30, 2006 Secretary of State

Entity Name: SPOKEN WORD DELIVERANCE MINISTRIES INC

Current Principal Place of Business: New Principal Place of Business:

P O BOX 454

INDIANTOWN, FL 34956

Current Mailing Address: New Mailing Address:

P O BOX 454

INDIANTOWN, FL 34956

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

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

WILLINGHAM-DENNIS, KARIN D

1316 WINDRIDGE CR

WILLINGHAM-DENNIS, KARIN D

1625 S E SHEPARD LANE

SANFORD, FL 32773 US STE 100

PORT SAINT LUCIE, FL 34983 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: KARIN WILLINGHAM-DENNIS 04/30/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: LORETTA, DAVIS Name: LORETTA, HILL D

 Address:
 P O BOX 454
 Address:
 P O BOX 454

 City-St-Zip:
 INDIANTOWN, FL 34956
 City-St-Zip:
 INDIANTOWN, FL 34956

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

Name: KARIN, DENNIS N Name:

 Address:
 P O BOX 470068
 Address:

 City-St-Zip:
 LAKE MONROE, FL 32747 00
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 DAVIS, MARY F
 Name:

 Address:
 P O BOX 454
 Address:

 City-St-Zip:
 INDIANTOWN, FL 34956 00
 City-St-Zip:

Title: SVP ( ) Delete Title: SVP (X) Change ( ) Addition

 Name:
 HILLS, JAMES A
 Name:
 HILLS, JAMES A

 Address:
 1812 BOOKER ST
 Address:
 2268 FRANKLIN ST

City-St-Zip: JACKSON, MS 39204 0 City-St-Zip: PORT SAINT LUCIE, FL 34953 00

I hereby certify that the information supplied with this filing does not qualify for the 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: LORETTA D HILL P 04/30/2006