

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006004

FILED
Apr 12, 2006
Secretary of State

Entity Name: VOICE OF THE HEART MINISTRIES, INC.

Current Principal Place of Business:

80 WEST CYPRESS RD.
LAKE WORTH, FL 33467

New Principal Place of Business:

80 WEST CYPRESS RD.
LAKE WORTH, FL 33467 US

Current Mailing Address:

80 WEST CYPRESS RD.
LAKE WORTH, FL 33467

New Mailing Address:

PO BOX 541053
GREENACRES, FL 33454 US

FEI Number: 20-4198188

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEIMER-BYRD, DEBORA
80 WEST CYPRESS RD.
LAKE WORTH, FL 33467 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: P () Delete
Name: LEIMER-BYRD, DEBORA
Address: 80 WEST CYPRESS RD.
City-St-Zip: LAKE WORTH, FL 33467

Title: V () Delete
Name: BYRD, CHARLES D
Address: 80 WEST CYPRESS RD.
City-St-Zip: LAKE WORTH, FL 33467

Title: S () Delete
Name: STRAUCH, LILA A
Address: 315 PINE SHADOW WAY
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: DEBORA LEIMER-BYRD

P

04/12/2006

Electronic Signature of Signing Officer or Director

Date