

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007294

FILED  
Apr 26, 2010  
Secretary of State

**Entity Name:** THE SIMPLE WORD MINISTRY INC.

**Current Principal Place of Business:**

434 S.W. EASTPORT CIRCLE  
PORT ST. LUCIE, FL 34953

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 882603  
PORT ST. LUCIE, FL 34988

**New Mailing Address:**

434 S.W. EASTPORT CIRCLE  
PORT ST. LUCIE, FL 34953

**FEI Number:** 41-2218478

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COOPER, JOHN SR.  
434 S.W. EASTPORT CIRCLE  
PORT ST. LUCIE, FL 34953 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  
**Name:** COOPER, JOHN SR.  
**Address:** 434 S.W. EASTPORT CIRCLE  
**City-St-Zip:** PORT ST. LUCIE, FL 34953

**Title:** V  
**Name:** COOPER, WANDA  
**Address:** 434 S.W. EASTPORT CIRCLE  
**City-St-Zip:** PORT ST. LUCIE, FL 34953

**Title:** T  
**Name:** COOPER, TERRENCE  
**Address:** 434 S.W. EASTPORT CIRCLE  
**City-St-Zip:** PORT ST. LUCIE, FL 34953

I hereby 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 all other like empowered.

**SIGNATURE:** JOHN COOPER SR.

P

04/26/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date