2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2008 8:00 am
Secretary of State
04-04-2008 90009 030 ****70.00

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1. Entity Name
LIGHT OF THE WORLD CHURCH MINISTRIES, INC

Principal Place of Business	Mailing Address
915 #2 RAILROAD AVE. TALLAHASSEE, FL 32310	P.O. BOX 12173 TALLAHASSEE, FL 32317

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

04012008 Chg-NP CR2E037 (12/06)

4. FEI Number 20-8455498 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SMITH, DERRICK L 1901 BUCKWOOD DRIVE TALLAHASSEE, FL 32317	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Derrick L. Smith 4/1/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARNES, DENNIS A 1517 MELVIN STREET TALLAHASSEE, FL 32301	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WYNN, PATRICIA E 6339 WOODVILLE HWY TALLAHASSEE, FL 32305	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROSS, JUANITA L 2454 APT A TALCO HILLS DR TALLAHASSEE, FL 32303	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Chuvala Snell-Brown 4179 Miraflores Ln Tallahassee FL 32304	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT WALKER, RONICA L 6841 CHISHOLM CT E TALLAHASSEE, FL 32311	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TT	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STRONG, KELVIN 309 RIDGE ROAD TALLAHASSEE, FL 32305	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Patricia E. Wynn PATRICIA E. WYNN 4/1/08 413-1670
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #