

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012976

FILED
Feb 15, 2009
Secretary of State

Entity Name: WORD FROM THE HEART MINISTRIES, INCORPORATED

Current Principal Place of Business:

1628 PICCADILLY DR
DAYTONA BEACH, FL 32117

New Principal Place of Business:

Current Mailing Address:

1628 PICCADILLY DR
DAYTONA BEACH, FL 32117

New Mailing Address:

FEI Number: 20-3836226

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, JEFFREY D SR
1628 PICCADILLY DR
DAYTONA BEACH, FL 32117 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: D () Delete
Name: ROBINSON, JEFFREY D SR
Address: 1628 PICCADILLY DR
City-St-Zip: DAYTONA BEACH, FL 32117

Title: D () Delete
Name: GRIFFIN, RYAN
Address: 3430 FLORIDA AVE
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: FREEMAN, JOHN
Address: 921 LEWIS DR
City-St-Zip: DAYTONA BEACH, FL 32117

Title: D () Delete
Name: HARRIS, NAYATI
Address: 1010 SWALLOW TAIL DRIVE, APT. # 1106
City-St-Zip: PORT ORANGE, FL 32129

Title: D () Delete
Name: DANIELS, JOE
Address: 56 FAIRVIEW AVE
City-St-Zip: DAYTONA BEACH, FL 32174

Title: D () Delete
Name: SMITH, EVANS
Address: 3377 GERBER DAISY LN
City-St-Zip: OVIEDO, FL 32766

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:

Title: () Change () Addition
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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 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: JEFFREY ROBINSON

CEO

02/15/2009

Electronic Signature of Signing Officer or Director

Date