

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007227

FILED  
Apr 29, 2007  
Secretary of State

**Entity Name:** WORLD CHANGERS HEALING INTERNATIONAL, INC.

**Current Principal Place of Business:**

1801 NW 35TH AVENUE  
LAUDERHILL, FL 33311

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 25012  
TAMARAC, FL 33320

**New Mailing Address:**

**FEI Number:** 20-4291250

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GREEN, VERNA  
1801 NW 35TH AVENUE  
LAUDERHILL, FL 33311 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: PD ( ) Delete  
Name: GREEN, VERNA  
Address: 1801 NW 35TH AVENUE  
City-St-Zip: LAUDERHILL, FL 33311

Title: D ( ) Delete  
Name: MILLER, DAISY  
Address: 1801 NW 35TH AVENUE  
City-St-Zip: LAUDERHILL, FL 33311

Title: D ( ) Delete  
Name: FACEN, DOROTHY  
Address: 1710 NW 34TH TERRACE  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D ( ) Delete  
Name: SPENCER, PATRICIA  
Address: 2601 NW 52ND AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33313

**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  
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: VERNA GREEN

PD

04/29/2007

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

\_\_\_\_\_  
Date