2007 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N06000007433

1. Entity Name
SPIRIT & SWORD MINISTRIES INC.



FILED Apr 20, 2007 8:00 am Secretary of State

04-20-2007 90079 008 ****61.25

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4093 MISSIC	e of Business ON BELL DRIVE EACH, FL 33436 US	Mailing Address 4093 MISSION BELL D BOYNTON BEACH, FL			٠,			
2. Principal P	flace of Business - No P.O. Box #	3. Mailing Address						
	<u></u>	<u> </u>				, 60117 96114 36611 63600 11166 11	MINT OF ICEN	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03212007 C	hg-NP	CR2E037 (12/06)		
City & State		City & State		4. FEI Number 31-1506	470		oplied For ot Applicable	
Zip	Country	Zip	Country	5. Certificate of St	tatus Desired	\$8.75 Add		
	6. Name and Address of Current	Registered Agent		7. Name and Add	iress of New R		_	
SHAW, THOMAS E			Name					
	SION BELL DRIVE		Street Addres	Street Address (P.O. Box Number is Not Acceptable)			· · · · · · · · · · · · · · · · · · ·	
BOYNTON BEACH, FL 33436								

			City			FL Zip Cod	e	
8. The above	named entity submits this statement for	or the purpose of changing its	s registered office or regis	stered agent, or both, in	the State of Flo	rida. I am familiar with,	and accept	
the obligat	tions of registered agent.							
0.00.11.70.00								
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered Agent signature requ	uired when remetating)		DATE		
				\$5.00 May Be	<u> </u>			
	Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution.			ake check payable t ida Department of Si		
		1		Added to Fees				
10.	OFFICERS AND DI	RECTORS	11.		ES TO OFFICER	RS AND DIRECTORS IN	I 10	
TITLE	Р	RECTORS Delete	TITLE		ES TO OFFICER	·	I 10 Addition	
TITLE NAME	P RICE, JAMES D		TITLE NAME		 ES TO OFFICER	RS AND DIRECTORS IN		
TITLE	Р		TITLE		LES TO OFFICES	RS AND DIRECTORS IN		
TITLE NAME STREET ADDRESS	P RICE, JAMES D 42773 SR 36		TITLE NAME STREET ADDRESS		ES TO OFFICER	RS AND DIRECTORS IN	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P RICE, JAMES D 42773 SR 36 WARSAW, OH 43844 VP SHAW, THOMAS E	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		LES TO OFFICER	RS AND DIRECTORS IN		
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12. I hereby certify that the information supplied with this filling 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.