

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010501

FILED  
Apr 27, 2008  
Secretary of State

**Entity Name:** JUDAH WORSHIP WORD MINISTRIES, INT'L, INC.

**Current Principal Place of Business:**

4441 WEST SUNRISE BOULEVARD  
FORT LAUDERDALE, FL 33313

**New Principal Place of Business:**

**Current Mailing Address:**

4441 WEST SUNRISE BOULEVARD  
FORT LAUDERDALE, FL 33313

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

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

MITCHELL, WILLETT  
10101 S.W. FIRST STREET  
FORT LAUDERDALE, FL 33324 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: WILLETT, MITCHELL  
Address: P.O. BOX 16690  
City-St-Zip: PLANTATION, FL 33318

Title: VD ( ) Delete  
Name: MAJORS, JIMMIE  
Address: 101 S.W. FIRST STREET  
City-St-Zip: FORT LAUDERDALE, FL 33324

Title: D ( ) Delete  
Name: FLEMING, BETTY  
Address: 4900 N.W. 18TH STREE  
City-St-Zip: LAUDERHILL, FL 33313

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: MAJORS, JIMMIE  
Address: 10101 S.W. FIRST STREET  
City-St-Zip: FORT LAUDERDALE, FL 33324

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: WILLETT L MITCHELL

PD

04/27/2008

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

\_\_\_\_\_  
Date