## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000007692

FILED Aug 01, 2008 Secretary of State

Entity Name: RHEMA WORD & PROPHETIC FELLOWSHIP CENTERS, INC.

**Current Principal Place of Business: New Principal Place of Business:** 11250 SW 218 STREET GOULDS, FL 33170 **Current Mailing Address: New Mailing Address:** 1651 NE 8TH STREET PMB 156 1651 NE 8TH STREET PMB 109 HOMESTEAD, FL 33033 HOMESTEAD, FL 33033 FEI Number: 32-0210048 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SMITH-WALLER, TAREA 11250 SW 218 STREET GOULDS, FL 33170 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PCEO** () Change () Addition () Delete SMITH-WALLER, TAREA DR. Name: Name: 11250 SW 218 STREET Address: Address: City-St-Zip: GOULDS, FL 33170 City-St-Zip: Title: () Delete Title: () Change () Addition BLACK, REGINALD B Name: Name: Address: 11107 SW 207TH STREET Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip: Title: DS ( ) Delete Title: (X) Change ( ) Addition COPPOLO, CAROLYNE Name: COPPOLO, CAROLYNE Name: 18470 SW 296TH STREET 18470 SW 296TH STREET Address: Address: City-St-Zip: HOMESTEAD, FL 33030 City-St-Zip: HOMESTEAD, FL 33030 Title: DT ( ) Delete Title: DS (X) Change ( ) Addition SMITH, LOUVENIA Name: Name: JOHNSON, DORIS P.O. BOX 343071 Address: 10227 SW 176TH STREET Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip: FL CITY, FL 33034 Title: () Delete Title: (X) Change ( ) Addition CHEW, LEON E MICHAEL, SMITH C Name: Name: 15460 SW 284TH STREET UNIT 4106 11250 SW 218 STREET Address: Address: HOMESTEAD, FL 33157 City-St-Zip: City-St-Zip: MIAMI, FL 33170, FL 33157 Title: () Delete Title: () Change () Addition FAUST, EARNEST H Name: Name: Address: 15410 SW 284TH STREET UNIT 8303 Address: HOMESTEAD, FL 33033 City-St-Zip: 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: PASTOR TAREA SMITH- WALLER PCEO 08/01/2008