2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005900

FILED Apr 06, 2009 Secretary of State

Entity Name: WIND OF CHANGE INTERNATIONAL CHURCH INC.

Current Principal Place of Business: New Principal Place of Business: 37458 AARALYN RD ZEPHYRHILLS, FL 33542 **Current Mailing Address: New Mailing Address:** 37458 AARALYN RD ZEPHYRHILLS, FL 33542 FEI Number: 80-0204785 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LAVALY, EDDIE 37548 AARALYN RD ZEPHYRHILLS, FL 33548 US 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: () Delete () Change () Addition LAVALY, EDDIE Name: Name: 37548 AARALYN RD Address: Address: City-St-Zip: ZEPHYRHILLS, FL 33542 City-St-Zip: Title: Title: OFFI (X) Change () Addition () Delete POPOOLA, BESI Name: POPOOLA, BESI Name: Address: 16820 STANZA CT Address: 16820 STANZA CT City-St-Zip: TAMPA, FL 33624 City-St-Zip: TAMPA, FL 33624 Title: OFFL () Delete Title: (X) Change () Addition DARSILVER, PHILIP DARSILVER, PHILIP Name: Name: 10554 TIMBER OAKS CT 19144 TILOBE LOOP Address: Address: City-St-Zip: TAMPA, FL 33615 City-St-Zip: LAND O LAKES, FL 33638 () Delete Title: OFFI Title: () Change () Addition Name: IDODO, JANE Name: 8832 BRENNAN CIR. Address: Address: City-St-Zip: TAMPA, FL 33615 City-St-Zip: Title: OFFL () Delete Title: OFFI (X) Change () Addition DUROJAIYE, IDOWU DUROJAIYE, IDOWU Name: Name: 5125 PALM SPRINGS BLVD # 5206 2540 GLENRISE PLACE Address: Address: City-St-Zip: TAMPA, FL 33647 City-St-Zip: WESLEY CHAPEL, FL 33544 Title: () Delete Title: (X) Change () Addition IDOWU, MICHAEL WURRIE-KEBE, ADAMA Name: Name: Address: 8805 ADKINS CT. #102 Address: 28622 FAIRWEATHER DR. TAMPA, FL 33615 WESLEY CHAPEL, FL 33543 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: EDDIE LAVALY P 04/06/2009