

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007053

FILED  
Feb 17, 2011  
Secretary of State

**Entity Name:** THE WAY OF GOD MINISTRIES INC.

**Current Principal Place of Business:**

5212 OCEANSIDE CT.  
TAMPA, FL 33624

**New Principal Place of Business:**

**Current Mailing Address:**

5212 OCEANSIDE CT.  
TAMPA, FL 33624

**New Mailing Address:**

8910 N DALE MABRY HWY.  
12  
TAMPA, FL 33614

**FEI Number:** 37-1577529

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WHITAKER, JOHN  
5212 OCEANSIDE CT  
TAMPA, FL 33624 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:** BRO  
**Name:** SMITH, ALEXANDER C  
**Address:** 5212 OCEANSIDE CT  
**City-St-Zip:** TAMPA, FL 33624

**Title:** S  
**Name:** TIMILSENA-SMITH, SUSMITA  
**Address:** 5212 OCEANSIDE CT  
**City-St-Zip:** TAMPA, FL 33624

**Title:** T  
**Name:** SMITH, JOSEPH C II  
**Address:** 5212 OCEANSIDE CT  
**City-St-Zip:** TAMPA, FL 33624

**Title:** MR.  
**Name:** HASSAN, MAHMOUD  
**Address:** 8910 N. DALE MABRY HWY SUITE 12  
**City-St-Zip:** TAMPA, FL 33614

I hereby 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 all other like empowered.

**SIGNATURE:** JOHN WHITAKER

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02/17/2011

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

\_\_\_\_\_  
Date