

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000004503

FILED
Apr 30, 2012
Secretary of State

Entity Name: WORD ALIVE WORSHIP CENTER, INC.

Current Principal Place of Business:

6495 SUNSET STRIP
SUNRISE, FL 33313 US

New Principal Place of Business:

Current Mailing Address:

PO. BOX 190422
LAUDERHILL, FL 33319 US

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENRY, ALVIN A
6495 SUNSET STRIP
SUNRISE, FL 33313 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: P, D
Name: HENRY, ANTOINETTE C
Address: 6495 SUNSET STRIP
City-St-Zip: SUNRISE, FL 33313 US

Title: D
Name: HENRY, ALVIN A
Address: 6495 SUNSET STRIP
City-St-Zip: SUNRISE, FL 33313 US

Title: D
Name: LEWIS, ALVAN L
Address: 6495 SUNSET STRIP, UNIT 10
City-St-Zip: SUNRISE, FL 33313 US

Title: D
Name: BAKER, TERRI
Address: 6495 SUNSET STRIP, UNIT 10
City-St-Zip: SUNRISE, FL 33313 US

Title: T
Name: JOHNSON, SANDRA
Address: 6495 SUNSET STRIP, UNIT 10
City-St-Zip: SUNRISE, FL 33313 US

Title: AT
Name: BROWN-PEOPLES, PAMELA
Address: 6495 SUNSET STRIP, UNIT 10
City-St-Zip: SUNRISE, FL 33313 US

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: ANTOINETTE C. HENRY

PD

04/30/2012

Electronic Signature of Signing Officer or Director

Date