

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000003931

FILED  
May 01, 2011  
Secretary of State

**Entity Name:** GREATER FAITH AND WORKS MINISTRY, INC.

**Current Principal Place of Business:**

6706 POMONA CT  
TALLAHASSEE, FL 32317

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 180366  
TALLAHASSEE, FL 32318

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WORD, LASHERINY A  
6706 POMONA CT  
TALLAHASSEE, FL 32317 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: C/P  
Name: WORD, MATTHEW D  
Address: 6706 POMONA CT  
City-St-Zip: TALLAHASSEE, FL 32317

Title: S  
Name: BAGIAS, TAKEISHA S  
Address: 2018 QUEENSWOOD DR  
City-St-Zip: TALLAHASSEE, FL 32303

Title: D/T  
Name: BAGIAS, ESTRADO  
Address: 2018 QUEENSWOOD DR  
City-St-Zip: TALLAHASSEE, FL 32303

Title: D  
Name: WALKER, SIDNEY  
Address: 8601 MARSHALLS LANE  
City-St-Zip: TALLAHASSEE, FL 32309

Title: D  
Name: WORD, LASHERINY A  
Address: 6706 POMONA CT  
City-St-Zip: TALLAHASSEE, FL 32317

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: LASHERINY A WORD

MGR

05/01/2011

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

\_\_\_\_\_  
Date