

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000002608

FILED  
Apr 27, 2012  
Secretary of State

Entity Name: WAFO MINISTRIES INC

**Current Principal Place of Business:**

10917 TREE CACTUS LOOP  
LAND O LAKES, FL 34638

**New Principal Place of Business:**

**Current Mailing Address:**

10917 TREE CACTUS LOOP  
LAND O LAKES, FL 34638

**New Mailing Address:**

FEI Number: 27-5206055

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WAFO, HAROLD D  
3303 N LAKEVIEW DR.  
APT. 2711  
TAMPA, FL 33618 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  
Name: WAFO, HAROLD D  
Address: 3303 N LAKEVIEW DR. APT 2711  
City-St-Zip: TAMPA, FL 33618

Title: VP  
Name: WAFO, PATRICIA D  
Address: 3303 N LAKEVIEW DR APT 2711  
City-St-Zip: TAMPA, FL 33618

Title: CFO  
Name: MEWAFO, MARIE-BLANCHE  
Address: 2334 GLENMONT CIR APT 202  
City-St-Zip: SILVER SPRING, MD 20902

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: HAROLD WAFO

P

04/27/2012

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

\_\_\_\_\_  
Date