

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000007926

**FILED**  
**Mar 13, 2012**  
**Secretary of State**

**Entity Name:** GOD'S WORD ON THE MOVE MINISTRIES, INC.

**Current Principal Place of Business:**

19011 NW 24TH AVE  
MIAMI GARDENS, FL 33056

**New Principal Place of Business:**

**Current Mailing Address:**

19011 NW 24TH AVE  
MIAMI GARDENS, FL 33056

**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:**

LEE, ALVIN C SR  
19011 NW 24TH AVE  
MIAMI GARDENS, FL 33056      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: D  
Name: LEE, ALVIN C SR  
Address: 19011 NW 24TH AVE  
City-St-Zip: MIAMI GARDENS, FL 33056

Title: D  
Name: LEE, TAMMY G  
Address: 19011 NW 24TH AVE  
City-St-Zip: MIAMI GARDENS, FL 33056

Title: D  
Name: LEE, TALA  
Address: 19011 NW 24TH AVE  
City-St-Zip: MIAMI GARDENS, FL 33056

Title: D  
Name: GARDENER, CLEMON  
Address: 1440 NW 176TH TERRACE  
City-St-Zip: MIAMI GARDENS, FL 33169

Title: D  
Name: GRAHAM, MICHAEL  
Address: 10560 SW 152ND TERRACE  
City-St-Zip: MIAMI, FL 33157

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: ALVIN C. LEE SR

PRE

03/13/2012

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

\_\_\_\_\_  
Date