

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000009992

FILED  
May 01, 2012  
Secretary of State

**Entity Name:** THE WORD AD, INC.

**Current Principal Place of Business:**

2919 S. HWY. 77  
LYNN HAVEN, FL 32444 US

**New Principal Place of Business:**

**Current Mailing Address:**

2919 S. HWY. 77  
LYNN HAVEN, FL 32444 US

**New Mailing Address:**

**FEI Number:** 45-3680969

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MCLEAN, SHARON  
9018 N. HOLLAND RD.  
SOUTHPORT, FL 32409 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/P  
**Name:** MCLEAN, SHARON  
**Address:** 9018 N. HOLLAND RD.  
**City-St-Zip:** SOUTHPORT, FL 32409 US

**Title:** D/V/P  
**Name:** MCMAHON, SHARON  
**Address:** 14105 PELICAN ST.  
**City-St-Zip:** PANAMA CITY BEACH, FL 32413 US

**Title:** D  
**Name:** SMITH, GARY  
**Address:** 7028 SOUTHWOOD ST  
**City-St-Zip:** PANAMA CITY, FL 32404 US

**Title:** D  
**Name:** WEAVER, BOBBY  
**Address:** 946 ROSEMONT DRIVE  
**City-St-Zip:** PANAMA CITY, FL 32405

**Title:** D  
**Name:** BARRON, DELORES  
**Address:** 3208 PLEASANT HILL RD  
**City-St-Zip:** LYNN HAVEN, FL 32444

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:** SHARON MCLEAN

D/P

05/01/2012

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

\_\_\_\_\_  
Date