

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17779

FILED  
Apr 13, 2004  
Secretary of State

Entity Name: WORD OF LIFE GOSPEL MINISTRIES, INC.

**Current Principal Place of Business:**

12106 PARKWOOD ST.  
HUDSON, FL 34669 US

**New Principal Place of Business:**

**Current Mailing Address:**

11016 PEPPERTREE LANE  
PORT RICHEY, FL 34668

**New Mailing Address:**

FEI Number: 59-2746683      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WARD, MARTIN LOUIS  
11016 PEPPERTREE LANE  
PORT RICHEY, FL 34668 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: PD ( ) Delete  
Name: WARD, MARTIN LOUIS  
Address: 11016 PEPPERTREE LN.  
City-St-Zip: PORT RICHEY, FL

Title: D ( ) Delete  
Name: BREWSTER, ALLAN  
Address: 10709 OAK DR  
City-St-Zip: HUDSON, FL 34669

Title: STD ( ) Delete  
Name: WARD, GAIL  
Address: 11016 PEPPERTREE LANE  
City-St-Zip: PORT RICHEY, FL 34668

Title: STD ( ) Delete  
Name: DICK, MONICA  
Address: 4719 BAXLEY LANE  
City-St-Zip: PORT RICHEY, FL 34668

Title: VD ( ) Delete  
Name: ISLEY, ROY  
Address: 8845 HIGHPOINT BLVD  
City-St-Zip: BROOKSVILLE, FL 34613

Title: D (X) Delete  
Name: WARD, GAIL  
Address: 11016 PEPPERTREE LANE  
City-St-Zip: PORT RICHEY, FL 34668

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: WARD, MARTIN LOUIS  
Address: 11016 PEPPERTREE LN.  
City-St-Zip: PORT RICHEY, FL 34668

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: WARD, GAIL  
Address: 11016 PEPPERTREE LANE  
City-St-Zip: PORT RICHEY, FL 34668

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: TIMOTHY, GARLAND  
Address: 244 GUN RIDGE RD  
City-St-Zip: VONORE, TN 37885

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARTIN LOUIS WARD

PD

04/13/2004

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

\_\_\_\_\_  
Date