

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39944

Entity Name: THE WORD FOUNDATION, INC.

FILED
Apr 30, 2004
Secretary of State

Current Principal Place of Business:

215 N. EOLA DRIVE
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

215 N. EOLA DRIVE
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 59-3032408

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOCTOR, JAMES J
215 N. EOLA DR.
ORLANDO, FL 32801 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: DPC () Delete
Name: JOHNSON, LORAN A.,
Address: P.O. BOX 26
City-St-Zip: WINTER PARK, FL 327900026

Title: DT () Delete
Name: JOHNSON, STACEY
Address: 1011 WEST HORATIO STREET, UNIT D
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: AGULIA, LAINIE J
Address: 10177 LEXINGTON LAKES BLVD. N.
City-St-Zip: BOYNTON BEACH, FL 33436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: JOHNSON, LORAN A
Address: 2381 SW ISLAND CREEK TRAIL
City-St-Zip: PALM CITY, FL 34990

Title: DT (X) Change () Addition
Name: JOHNSON, STACEY K
Address: 813 1/2 S WESTSHORE BLVD
City-St-Zip: TAMPA, FL 33609

Title: D (X) Change () Addition
Name: JOHNSON, LORAN A JR.
Address: 2310 PARHAM DRIVE
City-St-Zip: WILMINGTON, NC 28403

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: LORAN A. JOHNSON

PRES

04/30/2004

Electronic Signature of Signing Officer or Director

Date