2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40993

FILED Apr 23, 2005 Secretary of State

Entity Name: THE WORD OF THE LIVING GOD MINISTRIES, INC.

	Principal Place of Business: 6TH COURT O BEACH, FL 33069	New Principal Place of Business:
	/lailing Address:	New Mailing Address:
1111 NW POMPAN	24 AVE O BEACH, FL 33069	
FEI Number	r: 65-0234803 FEI Number Applied Fo	r () FEI Number Not Applicable () Certificate of Status Desired (X)
Name and	d Address of Current Registered Ag	ent: Name and Address of New Registered Agent:
	I, JOHN 6TH COURT O BEACH, FL 33069 US	
	e named entity submits this statement e of Florida.	for the purpose of changing its registered office or registered agent, or both,
SIGNATU	RE:	
	Electronic Signature of Registe	ered Agent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name: Address:	D () Delete MOHORN, JOHN 1111 NW 24TH AVENUE POMPANO BCH, FL 33060	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: () Change () Addition Name: Address: City-St-Zip:
Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	D () Delete MOHORN, JOHN 1111 NW 24TH AVENUE	Title: () Change () Addition Name: Address:
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Address: City-St-Zip:	D () Delete MOHORN, JOHN 1111 NW 24TH AVENUE POMPANO BCH, FL 33060 D () Delete MOHORN, DELBERT 1111 NW 24TH AVENUE	Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: Address:	D () Delete MOHORN, JOHN 1111 NW 24TH AVENUE POMPANO BCH, FL 33060 D () Delete MOHORN, DELBERT 1111 NW 24TH AVENUE POMPANO BCH, FL 33060 D () Delete MOHORN, MELVIN 2851 NW 6TH COURT	Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:

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: VELDA WRIGHT ST 04/23/2005