2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N43952

1. Entity Name



40.

FILED Jan 22, 2008 8:00 am Secretary of State

01-22-2008 90058 020 ****61.25

| WAYWOF | RD MINISTRIES OF LAKE | CITY, FLORI | DA, INC. | | | | | | | |
|--|--|--|---|---|---|---|--|--|---|--|
| Principal Place P.O. BOX 129 LAKE CITY, FI | 92 | Mailing Addre P.O. BOX 12 LAKE CITY, F | 92 | | | 400 | JU 1 V V . | | | |
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| | | 9. Mailing Add | ailing Address 1. Box 13.92 | | | | | HDF BION ONBITOUR | i ililisi billi bibi | HILL DI ILLI |
| Suiter Apt. | | Suite, Apt. | | | | 01112008 | Chg-NP | CR2E03 | 7 (12/06) | |
| City & State | بسساديد | City & Stat | | | · | 4. FEI Numbe 59-3076 | | | ⊢ | plied For at Applicable |
| <u>Lake</u> | Country | Zip | C(74, 15 | Country | - | | | | \$8.75 Add | |
| 3200 | 56 V.S. | 3305 | | Ų.S. | | | of Status Desired | | ee Require | |
| <u> </u> | 6. Name and Address of Curren | | <u>t</u> | Name | | 7. Name and | Address of New | Registered A | gent | |
| OSTECH, JOHN OSTEEN, JOHN | | | | Street A | ddress (F | P.O. Box Numbe | er is Not Acceptal | ole) | | - <u></u> - |
| LAKE CITY | Y, FL 32024 | | | | | | | | | |
| | | | | City | | | | FL | Zip Cod | 8 |
| the obligat | named entity submits this statement finds of registered agent. | for the purpose of o | hanging its reg tretain | gistered office or | r registere | ed agent, or bot | h, in the State of | Florida. I am f | amiliar with, | and accept |
| SIGNATURE . | | | | | | | · | DATE | | |
| 1. | Signature, typed or printed name of registered ager | nt and title ii applicable. | (AOTE: NO | egistered Agent signat | nue redniced | when reinstating) | | DAIL | | |
| and the state of t | Filing Fee is \$61.25 Due by May 1, 2008 | 9 . E | Election Campa Frust Fund Cont | aign Financing | | \$5.00 May B | e FI | Make check orida Depart | | |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. (356)752-5323 Church

SIGNATURE: John O'Steen

75a-689a Austor