

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000431

FILED
Apr 27, 2009
Secretary of State

Entity Name: INSPIRED WORD MINISTRY INC.

Current Principal Place of Business:

P.O. BOX 35095
PANAMA CITY, FL 32412

New Principal Place of Business:

707 SATAUMA AVE
PANAMA CITY, FL 32401

Current Mailing Address:

P.O. BOX 35095
PANAMA CITY, FL 32412

New Mailing Address:

P.O. BOX 696
PANAMA, FL 32402

FEI Number: 59-3166392

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BELL, WILLIE E
707 SATSUMA AVE.
PANAMA CITY, FL 32401 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: BELL, WILLIE E.
Address: 707 SATSUMS AVE
City-St-Zip: PANAMA CITY, FL

Title: TD () Delete
Name: MCCLAIN, HERBERT E
Address: 625 COLLEGE AVENUE
City-St-Zip: PANAMA CITY, FL

Title: SD () Delete
Name: BELL, MARY A.
Address: 707 SATSUMA AVE
City-St-Zip: PANAMA CITY, FL

Title: D () Delete
Name: WHITSETT, BILLY R
Address: 505 MAINE AVE
City-St-Zip: PANAMA CITY, FL 32401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BELL, WILLIE E DOCTOR
Address: 707 SATSUMS AVE
City-St-Zip: PANAMA CITY, FL 32401

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

Title: SD (X) Change () Addition
Name: BELL, MARY A
Address: 707 SATSUMA AVE
City-St-Zip: PANAMA CITY, FL 32401

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: WILLIE E. BELL

PD

04/27/2009

Electronic Signature of Signing Officer or Director

Date