

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002638

FILED
Apr 23, 2007
Secretary of State

Entity Name: PALM HARBOR WORD OF FAITH CHURCH, INC.

Current Principal Place of Business:

1588 KLOSTERMAN ROAD
PALM HARBOR, FL 34683

New Principal Place of Business:

Current Mailing Address:

1588 KLOSTERMAN ROAD
PALM HARBOR, FL 34683

New Mailing Address:

FEI Number: 59-3186258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLACK, SUSAN L
3504 ROLLING TRAIL
PALM HARBOR, FL 34684 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: P/D () Delete
Name: SNOW, LONNIE
Address: 2150 CIMARRON TERRACE
City-St-Zip: PALM HARBOR, FL 34683

Title: VP/D () Delete
Name: SNOW, KELLI
Address: 2150 CIMARRON TERRACE
City-St-Zip: PALM HARBOR, FL 34683

Title: SDZ (X) Delete
Name: WELCH, THOMAS M
Address: 4885 PARSON BROWN LANE
City-St-Zip: PALM HARBOR, FL 34684

Title: TD () Delete
Name: BLACK, SUSAN L
Address: 3504 ROLLING TRAIL
City-St-Zip: PALM HARBOR, FL 34684

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: STD (X) Change () Addition
Name: BLACK, SUSAN L
Address: 3504 ROLLING TRAIL
City-St-Zip: PALM HARBOR, FL 34684

I hereby certify that the information supplied with this filing does not qualify for the 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: SUSAN BLACK

STD

04/23/2007

Electronic Signature of Signing Officer or Director

Date