

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002694

FILED
May 12, 2009
Secretary of State

Entity Name: WORD OF FAITH OF THE APOSTOLIC CHURCH, INC.

Current Principal Place of Business:

3202 22ND MYRTLE AVE
JACKSONVILLE, FL 32209

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 9402
JACKSONVILLE, FL 32208

New Mailing Address:

FEI Number: 59-3128953 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WILLIAMS, GERALD A
3528 BRAN CT. W.
JACKSONVILLE, FL 32211 US

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: D () Delete
Name: WILLIAMS, JR., GERALD ANTHONY
Address: 8634 SAN LANDO AVENUE
City-St-Zip: JACKSONVILLE, FL 32211

Title: PD () Delete
Name: WILLIAMS, GERALD
Address: 3528 BRAN CT.
City-St-Zip: JACKSONVILLE, FL 32211

Title: D () Delete
Name: TOBLER, ALTON
Address: 2442 WYLENE ST
City-St-Zip: JACKSONVILLE, FL

Title: S () Delete
Name: WILLIAMS, GAIL
Address: 3528 BRAN CT W
City-St-Zip: JAX, FL 32211

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: () 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: GERALD WILLIAMS

PD

05/12/2009

Electronic Signature of Signing Officer or Director

Date