

**2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Feb 26, 2006**  
**Secretary of State**

DOCUMENT# N94000005658

**Entity Name:** THE WORD OF HIS GRACE CHRISTIAN FELLOWSHIP, INC.**Current Principal Place of Business:**2506 PARSONS AVE  
SEFFNER, FL 33584**New Principal Place of Business:****Current Mailing Address:**2506 PARSONS AVE  
SEFFNER, FL 33584**New Mailing Address:****FEI Number:** 59-3273846**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**GIBBS, DAVID C III  
5666 SEMINOLE BLVD.  
SUITE 2  
SEMINOLE, FL 34642 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:** PHILLIPS SR, SAMUEL L  
**Address:** 220 BON VIE PLACE  
**City-St-Zip:** VALRICO, FL 33695 US**Title:** APD ( ) Delete  
**Name:** THOMAS, RONALD G  
**Address:** 11553 WELLMAN DR.  
**City-St-Zip:** RIVERVIEW, FL 33569 US**Title:** SD ( ) Delete  
**Name:** BRYANT, WAYNE  
**Address:** 2034 ELK SPRING DR  
**City-St-Zip:** BRANDON, FL 33511**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** SD (X) Change ( ) Addition  
**Name:** DEMPS, ARTHUR J  
**Address:** 1513 SILKTREE COURT  
**City-St-Zip:** BRANDON, FL 33511

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: WAYNE BRYANT, SR

SD

02/26/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director\_\_\_\_\_  
Date