## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

N9600006397 (1)

WORD FAITH MINISTRIES OF FORT LAUDERDALE, INC.

Principal Place of Business

Mailing Address

## **FILED** Apr 21 1997 8:00am Secretary of State



1751 NW 36TH AVE. FORT LAUDERDALE FL 33311		1751 NW 36TH AVE. FORT LAUDERDALE FL 33311-4128				
					3. Date Incorporated or Qualified 12/17/1996	3a. Date of Last Report
2. Principal Pi	ace of Business	2a. Mailing Address			4, FEI Number	Applied For
21		26			65-0714220	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	<b>¬</b> , '		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip 24	Country 25	Zip 29	30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
			3	1 Name		
STUBBS, STANLEY 1751 NW 36TH AVE.				2 Street Add	dress (P.O. Box Number is Not Acceptab	ole)
	AUDERDALE FL 33311		[8	3	· · · · · · · · · · · · · · · · · · ·	
j.			E	4 City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 617.0502	and 617.1508, Florida Sta	atutes, the abo	ove-named cor	rporation submits this statement for the p	
11. Pursuant to the provisions of Sections 617.0502 and 617.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
SIGNATURE Student 3 LIGHT						
	Signature, typed or printed name of regis real agen			gent signature requ		
12.	OFFICERS AND	DELETE	13.	<u> </u>	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	STUBBS, STANLEY		1.2 NAM	4	Director	' ' '
STREET ADDRESS	1751 NW 36TH AVE.			ET ADDRESS	1045 min. 900	م×عرد. اؤ
CITY-ST-ZIP	FORT LAUDERDALE FL 33311				Summibe 72.	
TITLE	VD	DELETE	2.1 TITL	-01-211	ASSISTEME SECVEN	Change Addition
NAME	WHEELER, GUY	_	22 NAM		emmifer Tolius	
STREET ADDRESS	1751 NW 36TH AVE.		2.3 STR	ET ADDRESS	5985 N.W. 384	AUC
CITY-ST-ZIP	FORT LAUDERDALE FL 33311		2. 4 CHT		anderdale luxu	es 71. 33309
TITLE	STD	DELETE	3.1 TITE	31	DITCEROY	Change M Addition
NAME	STUBBS, MOLLIE		3.2 NAM	E   7	Franck ma 43 here	· · ·
STREET ADDRESS	1751 NW 36TH AVE.		3.3 STR		1891 M.W. 754	
CITY-ST-ZIP	FORT LAUDERDALE FL 33311		3.4. CIT	(-SI-ZIP	Laudah: 11 72.	23319
TITLE		☐ DELETE	4.1 TiTL	E   ""	,	Change Addition
NAME			4. 2 NA	AE .		
STREET ADDRESS			4.3 STR	ET ADDRESS		
CITY-ST-ZIP				-SI-ZIP		
TITLE		☐ DELETE	5.1 TITU	1		Change Addition
NAME			5.2 NAM			
STREET ADDRESS				EET ADDRESS		
CITY-\$1-ZIP		Distress		-ST-ZIP		Change Ladder
TITLE		DELETE	6.1 TITL	1		Change Addition
NAME			6.2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-\$T-ZIP			6.4 CITY	-ST-ZIP		

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.