

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2009
Secretary of State

DOCUMENT# N97000000512

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

Current Principal Place of Business:

BY THE WORD OF FAITH CHURCH
558 28TH ST. SO.
SAINT PETERSBURG, FL 33712 US

New Principal Place of Business:

Current Mailing Address:

558 28TH STREET SOUTH
008/0090 558 28TH ST, SO
ST PETERSBURG, FL 33712 US

New Mailing Address:

FEI Number: 59-3424347 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:

SANDS, WILLIE C
3537 BEACH DR SOUTHEAST
SAINT PETERSBURG, FL 33705 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: AP () Delete
Name: SANDS, WILLIE
Address: 558 28TH STREET SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: S () Delete
Name: JONES, LORENZO
Address: 558 28TH STREET SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: VD () Delete
Name: SANDS, PATRICIA
Address: 558 28TH STREET SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: TR () Delete
Name: JONES, LORENZO
Address: 558 28TH ST. SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: CD () Delete
Name: WIGGINS, RICHARD
Address: 558 28TH STREET SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: D () Delete
Name: JONES, PATRICIA
Address: 558 28TH ST S
City-St-Zip: SAINT PETERSBURG, FL 33712

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:

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: WILLIE SANDS

_____ Electronic Signature of Signing Officer or Director

PRES

05/04/2009

_____ Date