2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2009
Secretary of State

DOCUMENT# N97000001939

Entity Name: IN THE WORD MINISTRIES PRAISE AND WORSHIP CENTER, INC.

Current Principal Place of Business:

1220 15TH STREET
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

7047 GALLEON COVE CIR
WEST PALM BEACH, FL 33418

New Mailing Address:

FEI Number: 65-0744558 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GILBERT, BOBBY SR
7047 GALLEON COVE CIRCLE
PALM BCH GARDENS, FL 33418 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: BOBBY GILBERT, SR,
Address: 7047 GALLEON COVE CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VP/D ( ) Delete
Name: ANNETTE M GILBERT,
Address: 7047 GALLEON COVE CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: T/D ( ) Delete
Name: PARMS, DONALD N SR.
Address: 1504 W. 18TH STREET
City-St-Zip: RIVIERA BEACH, FL 33404

Title: D ( ) Delete
Name: SCHOEFIELD, SHARON
Address: 800 MALIBU DRIVE
City-St-Zip: WEST PALM BEACH, FL 33401

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: BOBBY GILBERT SR. P/D 03/31/2009

Electronic Signature of Signing Officer or Director — Date