

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006480

FILED
Mar 31, 2005
Secretary of State

Entity Name: WORD OF LIFE FELLOWSHIP CHURCH INC.

Current Principal Place of Business:

400 PEACHTREE ST.
DELAND, FL 32724 US

New Principal Place of Business:

Current Mailing Address:

400 PEACHTREE ST.
DELAND, FL 32724 US

New Mailing Address:

FEI Number: 59-3492433

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRANE, JOIE W
1895 E. GRAVES AVENUE
ORANGE CITY, FL 32774 US

Name and Address of New Registered Agent:

REID, CONRAD V
210 SOUTH JULIA AVE
DELAND, FL 32720 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: CONRAD V. REID JR

03/31/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: POT () Delete
Name: COLEMAN, ARNOLD LEE
Address: 400 PEACHTREE ST.
City-St-Zip: DELAND, FL 32724 US

Title: VOS () Delete
Name: BAILEY, ANNIE BRITT
Address: 327 W. WALTZ AVENUE
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: RICHARDSON, MAMIE
Address: 1500 PERIWINKLE AVENUE
City-St-Zip: DELAND, FL 32724

Title: D () Delete
Name: RUTLEDGE, SANDRA
Address: 422 PRIMROSE CIRCLE
City-St-Zip: DELAND, FL 32724

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 for the exemption stated in Section 119.07(3)(i), 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: CONRAD V REID JR

REV

03/31/2005

Electronic Signature of Signing Officer or Director

Date