2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003
Secretary of State

DOCUMENT# N98000005103

Entity Name: KAY NEWSOM MINISTRIES/WOMEN OF GOD'S WORD, INC.

Current Principal Place of Business:

902 WYNGATE COURT
SAFETY HARBOR, FL 34695

New Principal Place of Business:

Current Mailing Address:

902 WYNGATE COURT
SAFETY HARBOR, FL 34695

New Mailing Address:

FEI Number: 59-3565435 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NEWSOM, KAY
902 WYNGATE COURT
SAFETY HARBOR, FL 34695

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:	NEWSOM, SHARON K	
Address:	902 WYNGATE COURT	
City-St-Zip:	SAFETY HARBOR, FL	
Title:	VTD	( ) Delete
Name:	NEWSOM, MICHAEL L	
Address:	902 WYNGATE COURT	
City-St-Zip:	SAFETY HARBOR, FL 34695	
Title:	D	( ) Delete
Name:	SALING, GARY	
Address:	5301 W CYPRESS ST, STE 307	
City-St-Zip:	TAMPA, FL 33607	
Title:	D	( ) Delete
Name:	ROLLOW, THOMAS A	
Address:	1526 WOODSTREAM DRIVE	
City-St-Zip:	OLDSMAR, FL 34677	
Title:	D	( ) Delete
Name:	LANDON, DALE	
Address:	2763 ENTERPRISE RD EAST #78	
City-St-Zip:	CLEARWATER, FL 33759	
Title:	D	( ) Delete
Name:	HUBBARD, JOHN REV	
Address:	38 HARBOR LAKE CIRCLE	
City-St-Zip:	SAFETY HARBOR, FL 34695	

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 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: SHARON K. NEWSOM PRES 04/28/2003

Electronic Signature of Signing Officer or Director — Date