2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004754

Apr 24, 2010 Secretary of State

Entity Name: THE WAY OF THE WORD MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business:

761 ACORN STREET 3692 JULIET CIR. SOUTH JACKSONVILLE, FL 32209 JACKSONVILLE, FL 32218

Current Mailing Address: New Mailing Address:

761 ACORN STREET 3692 JULIET CIR. SOUTH JACKSONVILLE, FL 32218 JACKSONVILLE, FL 32209

FEI Number: 59-3567076 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HARRIS, JAMES S 11517 BÍRCH FOREST CIRCLE E. JACKSONVILLE, FL 32218

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:

BURCH, HOMER L Name: Address: 3692 JULIET CIR. SOUTH City-St-Zip: JACKSONVILLE, FL 32218

Title: VD

Name: BURCH, PATRICIA Address: 3962 JULIET CIR. SOUTH City-St-Zip: JACKSONVILLE, FL 32218

Title:

YOUNG, SHELTON Name:

11247 SAN JOSE BLVD. APT# 719 Address:

City-St-Zip: JACKSONVILLE, FL 32223

Title: SD

Name: HOLBACK, MARY Y 0525 DONIPHON DR Address: City-St-Zip: JACKSONVILLE, FL 32218

Title: TSD

YOUNG, CHELENE Name:

11247 SAN JOSE BLVD. APT # 719 Address: City-St-Zip: JACKSONVILLE, FL 32223

I hereby 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 all other like empowered.

SIGNATURE: HOMER BURCH PD 04/24/2010