

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 16, 2007
Secretary of State**

DOCUMENT# N00000002484

Entity Name: WINDS OF TRUTH, INC.

Current Principal Place of Business:

25955 SW 122 COURT
MIAMI, FL 33032

New Principal Place of Business:

Current Mailing Address:

25955 SW 122 COURT
MIAMI, FL 33032

New Mailing Address:

FEI Number: 65-1007259 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:

JACOBS, DEBORAH
25955 SW 122 COURT
MIAMI, FL 33032 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 () Delete
Name: JACOBS, DEBORAH
Address: 25955 SW 122 CT.
City-St-Zip: MIAMI, FL 33032

Title: VP () Delete
Name: JACOBS, RONALD
Address: 25955 SW 122 CT.
City-St-Zip: MIAMI, FL 33032

Title: S () Delete
Name: FLEMING, LEE
Address: 17015 S.E. 34TH STREET
City-St-Zip: VANCOUVER, WA 98583

Title: T () Delete
Name: FLEMING, THELMA
Address: 17015 S.E. 34TH STREET
City-St-Zip: VANCOUVER, WA 98583

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: DEBORAH JACOBS

PRES

05/16/2007

Electronic Signature of Signing Officer or Director

_____ Date