2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Jan 26, 2005 08:00 AM Secretary of State DOCUMENT # 706311 1. Entity Name FAITH CHURCH OF DADE, INC. Principal Place of Business Mailing Address 11948 NW 11TH COURT CORAL SPRINGS FL 33071 11948 NW 11TH COURT CORAL SPRINGS FL 33071 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc. 1st MOORE CR2E037 (10/04) City & State City & State 4. FEI Number Applied For 59-1695709 Not Applicab Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ALESSI, PAUL JR Street Address (P.O. Box Number is Not Acceptable) 11948 NW 11 COURT CORAL SPRINGS FL 33071 City Zip Code 8. The above named entity submits the s statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accep the obligations of registered FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE SD ☐ Delete DITE ☐ Change Addition ALESSI, MARK P NAME NAME 9269 N.W 9 COURT STREET ADDRESS LITREET ADDRESS FORT LAUDERDALE FL 33324 CITY-ST-ZIP CITY-ST-ZIF THE ☐ Delete TITLE Change Addition U00000197511 DUNCAN, WANDA NAME NAMI 01/27/05-80015-002 61.25 STREET ADDRESS 11948 NW 11 COURT STR-ET ADDRESS CORAL SPRINGS FL 33071 City ST-ZiP ULIY-SI-ZIP PD HILE ☐ Delete TOTAL ☐ Change Additio ALESSI, PAUL, JR NAME 11948 NW 11TH COURT STREET ADDRESS. STREET ADDRESS CITY - ST - ZIP CORAL SPRINGS FL 33071 CHY-SI-7P TITLE ☐ Delete HILE Change Addish ALESSI, JOHN NAME NAME 10304 SW 87TH COURT STREET ADDRESS STREE! ADDRESS MIAMI FL 33156 CHY SL-AP CiTY+S1+ZiP THLE ☐ Delete Hitt ☐ Change ☐ Additio NAME NAME STREET ADDRESS STREET ADDRESS City ST-ZiP CITY-ST-ZIP Delete LITLE □ Addibo Change NAME STREET ADORESS STREET ADDRESS CITY ST ZIP CHY-ST- ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 five and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED