

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007855

FILED
Jul 06, 2007
Secretary of State

Entity Name: FAITH 2 ACTION 4 EDUCATION, INC.

Current Principal Place of Business:

P.O. BOX 633
DANIA BEACH, FL 330040633

New Principal Place of Business:

4945 SW 34 TERRACE
FORT LAUDERDALE, FL 33312

Current Mailing Address:

P.O. BOX 633
DANIA BEACH, FL 330040633

New Mailing Address:

FEI Number: 74-3068193 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:

LAUDADIO, JOHN A
210 N UNIVERSITY DRIVE
SUITE 707
CORAL SPRINGS, FL 33071 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: PD () Delete
Name: FOLGER, JANET L
Address: 4945 SOUTHWEST 34TH TERRACE
City-St-Zip: FT LAUDERDALE, FL 333127950

Title: VD () Delete
Name: CRAMPTON, STEVE
Address: 100 PARKGATE DRIVE
City-St-Zip: TUPELO, MS 38801

Title: SD () Delete
Name: VELAZQUEZ, LISA
Address: 43675 JERNIGAN TERRACE
City-St-Zip: LEESBURG, VA 20176

Title: TD () Delete
Name: MCMILLIN, THOMAS E
Address: 3048 CARLY COURT
City-St-Zip: AUBURN HILLS, MI 48326

Title: D () Delete
Name: DORAN, BILL
Address: 5405 WHITE OAK LANE
City-St-Zip: FT. LAUDERDALE, FL 33319

Title: D () Delete
Name: VANCURLER, DON
Address: 2008 HOGBACK RD, SUITE 6
City-St-Zip: ANN ARBOR, MI 48105

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
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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: JANET L FOLGER

PD

07/06/2007

Electronic Signature of Signing Officer or Director

_____ Date