

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 01, 2007
Secretary of State

DOCUMENT# N06000006408

Entity Name: FAITH RESTORATION WORSHIP CENTER INC.**Current Principal Place of Business:**4686 PALOMAR AVE
FT. PIERCE, FL 34946**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 934
FT. PIERCE, FL 349540934**New Mailing Address:****FEI Number:** 20-5077824**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**BEAUFORD, TERRANCE
4541 WHISPERING PINES LANE
FT. PIERCE, FL 34982 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: JENKINS, RONNIE
Address: 7804 CITRUS PARK BLVD
City-St-Zip: FT. PIERCE, FL 34951**Title:** S () Delete
Name: JENKINS, LASHANDRA
Address: 7804 CITRUS PARK BLVD
City-St-Zip: FT. PIERCE, FL 34951**Title:** VD () Delete
Name: JENKINS, LASHANDRA
Address: 7804 CITRUS PARK BLVD
City-St-Zip: FT. PIERCE, FL 34951**Title:** T () Delete
Name: BEAUFORD, TERRANCE
Address: 4541 WHISPERING PINES LANE
City-St-Zip: FT. PIERCE, FL 34982**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P/D (X) Change () Addition
Name: JENKINS, RONNIE
Address: 7804 CITRUS PARK BLVD
City-St-Zip: FT. PIERCE, FL 34951**Title:** S (X) Change () Addition
Name: CRUZ, TONYA
Address: P.O. BOX 934
City-St-Zip: FT. PIERCE, FL 34954**Title:** V (X) Change () Addition
Name: JENKINS, LASHANDRA
Address: 7804 CITRUS PARK BLVD
City-St-Zip: FT. PIERCE, FL 34951**Title:** T (X) Change () Addition
Name: MCDONALD, GREGORY
Address: P.O. BOX 934
City-St-Zip: FT. PIERCE, FL 34954**Title:** D #2 () Change (X) Addition
Name: BEAUFORD, TERRANCE
Address: 4541 WHISPERING PINES LANE
City-St-Zip: FT. PIERCE, FL 34982

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: TERRANCE BEAUFORD

D #2

08/01/2007

Electronic Signature of Signing Officer or Director

Date