

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27728

FILED  
Feb 15, 2012  
Secretary of State

Entity Name: FLORIDA FAITH FORUM, INC.

**Current Principal Place of Business:**

2530 WILSON ROAD  
LAND O LAKES, FL 34638

**New Principal Place of Business:**

**Current Mailing Address:**

2530 WILSON ROAD  
LAND O' LAKES, FL 34638

**New Mailing Address:**

FEI Number: 59-2909940

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JOHNSON, WILLIAM W PRESIDE  
2530 WILSON ROAD  
LAND O LAKES, FL 34638 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  
Name: JOHNSON, W. WOODLAND, JR  
Address: 22249 CARSON DR  
City-St-Zip: LAND O LAKES, FL 34639

Title: VP  
Name: MATHIAS, FRANK VP  
Address: 13618 GREENFIELD DR # 203  
City-St-Zip: TAMPA, FL 33618

Title: TD  
Name: SKIPPER, STANLEY J., SR.  
Address: 2007 DELEON, APT A  
City-St-Zip: TAMPA, FL

Title: D  
Name: PIETZ, GREG  
Address: 6904 SHADY PLACE  
City-St-Zip: TAMPA, FL 33634

Title: D  
Name: MACHESNEY, A ALLEN  
Address: 10336 BUNCOME WAY  
City-St-Zip: SAN ANTONIO, FL 33576

Title: D  
Name: SHOREY, ROBERT J D  
Address: 4542 MAPLETREE LOOP  
City-St-Zip: WESLEY CHAPEL, FL 33544

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: WILLIAM W. JOHNSON

PRES

02/15/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date