2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004748

FILED May 01, 2007 Secretary of State

Entity Name: FAITH AND POWER WORSHIP CENTER, INC.

Current Principal Place of Business: New Principal Place of Business:

P. O. BOX 162616

ALTAMONTE SPRINGS, FL 32716

Current Mailing Address: New Mailing Address:

P.O. BOX 162616

ALTAMONTE SPRINGS, FL 32716 US

FEI Number: 59-3593172 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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: Name and Address of New Registered Agent:

SHAW, MATTHEW J PASTOR SHAW, MATTHEW J PASTOR 6706 POMEROY CIRCLE 222 N. CASTLEFORD COURT ORLANDO, FL 32810 LONGWOOD, FL 32779

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: MATTHEW J. SHAW 05/01/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete SHAW, MATTHEW J SHAW, MATTHEW J Name: Name: 6706 POMEROY CIRCLE Address: 222 N. CASTLEFORD COURT Address: City-St-Zip:

ORLANDO, FL 32810 City-St-Zip: LONGWOOD, FL 32779

(X) Change () Addition Title: VD () Delete Title: VD Name: SHAW, PAMELA B Name: SHAW, PAMELA B

Address: 6706 POMEROY CIRCLE Address: 222 N. CASTLEFORD COURT City-St-Zip: ORLANDO, FL 32810 City-St-Zip: LONGWOOD, FL 32779

Title: () Delete Title: () Change () Addition

SHAW, JEFFREY M Name: Name: 2331 CIMMARON ASH WAY Address: Address: City-St-Zip: APOPKA, FL 32703 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: MATTHEW J. SHAW **PRES** 05/01/2007