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. PPD

SIGNATURE: ANTHONY DAVID

Electronic Signature of Signing Officer/Director Detail

SIGNATURE:

Address

City-State-Zip:

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.

PO BOX 181

SILVER SPRINGS. FL 34489

DAVID, ANTHONY 264 NE 172 AVE SILVER SPRINGS, FL 34488 US

FEI Number: 52-2376577

Electronic Signature of Registered Agent **Officer/Director Detail :** PPD Title Title SD DAVID, ANTHONY Name DAVID, NOAL STANLEY Name Address 264 NE 172 AVE Address 242 NE 172 AVE City-State-Zip: SILVER SPRINGS FL 34488 SILVER SPRINGS FL 34488 City-State-Zip: TD

Title DAVID, SHEILA Name

264 NE 172 AVE

SILVER SPRINGS FL 34488

Name and Address of Current Registered Agent:

SILVER SPRINGS, FL 34488 **Current Mailing Address:**

Current Principal Place of Business: 264 NE172 AVE

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0200007132

Entity Name: FAITH FAMILY FELLOWSHIP CHURCH, INC.

Certificate of Status Desired: Yes

Date

04/12/2024

FILED Apr 12, 2024 Secretary of State 4755016159CC

Date