

**2020 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F18000001033

**Entity Name:** BUILDING FAITH PLAY THERAPY TOYS, INC.

**Current Principal Place of Business:**

2189 ALDAH DR.  
TUCKER, GA 30084

**FILED**  
**Mar 22, 2020**  
**Secretary of State**  
**8783169450CC**

**Current Mailing Address:**

2552 BLUFFTON DRIVE  
JACKSONVILLE, FL 32224 US

**FEI Number: 47-2182121**

**Certificate of Status Desired: No**

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

UNITED CORPORATION AGENTS, INC.  
13302 WINDING OAK COURT, SUITE A  
TAMPA, FL 33612 US

*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

**Officer/Director Detail :**

Title DP  
Name FINDLAY, ALISON  
Address 2552 BLUFFTON DRIVE  
City-State-Zip: JACKSONVILLE FL 32224

Title VP  
Name GILLESPIE, RUTH  
Address 2460 PEACHTREE ROAD, UNIT 1008  
City-State-Zip: ATLANTA GA 30305

Title S  
Name DEWBERRY, DEBORAH  
Address 2189 ALDAH DRIVE  
City-State-Zip: TUCKER GA 30084

Title T  
Name PALALA, GRACE  
Address 108 ROCK LEDGE DRIVE  
City-State-Zip: GREENVILLE SC 29609

*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: ALISON B FINDLAY**

**PRESIDENT**

**03/22/2020**

Electronic Signature of Signing Officer/Director Detail

Date