


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 20, 2006 8:00 am**  
**Secretary of State**

02-20-2006 90049 011 \*\*\*\*\*70.00

<b>DOCUMENT # 710310</b>	
1. Entity Name <b>GOD'S FAITH TABERNACLE, INC.</b>	

Principal Place of Business <b>5508 DIXIE AVE CALLAHAN FL 32011 US</b>	Mailing Address <b>P.O. BOX 1601 CALLAHAN FL 32011 US</b>
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2. Principal Place of Business <b>45260 DIXIE AVE Suite, Apt. #, etc. Callahan, FL City &amp; State</b>	3. Mailing Address <b>P.O. Box 1601 Suite, Apt. #, etc. Callahan, FL City &amp; State</b>
Zip <b>32011</b> Country <b>NASSAU</b>	Zip <b>32011</b> Country <b>NASSAU</b>

1st MOORE CR2E037 (10/05)

4. FEI Number <b>59-2867788</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>MIDYETTE, JOE REV. 5339 4TH AVENUE CALLAHAN FL 32011</b>	
7. Name and Address of New Registered Agent Name <b>Rev. Joe Midyette</b> Street Address (P.O. Box Number is Not Acceptable) <b>44209 Pine Breeze Circle</b> City <b>Callahan</b> FL Zip Code <b>32011</b>	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Rev. Joe Midyette Pastor (NOTE: Registered Agent signature required when reinstating) DATE 2-9-2005

<b>FILE NOW - FEE IS \$61.25 Due By May 1, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P MIDYETTE, JOE REV. 5339 4TH AVENUE CALLAHAN FL 32011</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P Midyette, Joe Rev. 44209 Pine Breeze Circle Callahan, FL 32011</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ST MIDYETTE, STEPHANIE 2455 CONGRESS PLACE BRYCEVILLE FL 32009</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V MIDYETTE, LINDA REV. 5339 4TH AVENUE CALLAHAN FL 32011</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V Midyette, Linda Rev 44209 Pine Breeze Circle Callahan, FL 32011</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D COURTNEY, LISA RT. 1, BOX 218 BRYCEVILLE FL 32011</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D CARTER, RITA P.O. BOX 1479 N/A CALLAHAN FL 32011</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D Carter, Rita 2929 Waller Street Jacksonville, FL 32254</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D CARTER, LARRY JR 2929 WALLER STREET JACKSONVILLE FL 32254</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rev. Joe Midyette - Pastor 2-9-2005 904-872-6123