2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #712019

1. Entity Name

FIRST ALLIANCE CHURCH, INCORPORATED



FILED Mar 03, 2008 08:00 A Secretary of State

Principal Place of Business

5000-10TH ST NO

ST PETERSBURG, FL 33703

Mailing Address

5000-10TH ST NO

ST PETERSBURG, FL 33703



DO NOT WRITE IN THIS SPACE

 02072008
 No Chg-NP
 CR2E037 (4/06)

 4. FEI Number
 Applied For Not Applicable

Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PARDUN, MICHAEL 2561 16TH AVE N ST. PETERSBURG, FL 33713

DO NOT WRITE IN THIS SPACE

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. 2 - 2 8 - 38					
Signeture, typed or frithted name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
	Filing Fee Is \$61.25 Due by May 1, 2008	Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZiP	SD RAMPERSAUD, PRAD 6183 4TH AVE. N. SAINT PETERSBURG, FL 33710				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SMITH, TERRY REV 5030 10TH ST, N. SAINT PETERSBURG, FL 33703		000000844665 03/13/08-80009-005 61.25		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PARDUN, MICHAEL 2561 16TH AVE N SAINT PETERSBURG, FL 33713			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HINES, ANDREW 249 COLONY POINT ROAD SAINT PETERSBURG, FL 33705		٠.	. IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 emphasized 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 express of the execute this empowered.

SIGNATURE: 🚅

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL PAROUN

2-28-00

Daytime Phone #