2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#712019

FILED Feb 27, 2009 Secretary of State

Entity Name: FIRST ALLIANCE CHURCH, INCORPORATED

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

5000-10TH ST NO ST PETERSBURG, FL 33703

Current Mailing Address: New Mailing Address:

5000-10TH ST NO ST PETERSBURG, FL 33703

FEI Number: 59-2297861 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PARDUN, MICHAEL RAMPERSAUD, PRAD 2561 16TH AVE N 6183 4TH AVE N

ST. PETERSBURG, FL 33713 US ST. PETERSBURG, FL 33710 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: PRAD RAMPERSAUD 02/27/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: SD () Delete Title: EL (X) Change () Addition

Name:RAMPERSAUD, PRADName:RAMPERSAUD, PRADAddress:6183 4TH AVE. N.Address:6183 4TH AVE. N.

City-St-Zip: SAINT PETERSBURG, FL 33710 City-St-Zip: SAINT PETERSBURG, FL 33710

Title: P () Delete Title: DE (X) Change () Addition Name: SMITH, TERRY REV Name: PARKES, WESLEY

 Name:
 SMITH, TERRY REV
 Name:
 PARKES, WESLEY

 Address:
 5030 10TH ST, N.
 Address:
 3801 WHITING DRIVE SE

 City-St-Zip:
 SAINT PETERSBURG, FL 33703
 City-St-Zip:
 SAINT PETERSBURG, FL 33705

Title: TD () Delete Title: TR (X) Change () Addition

 Name:
 PARDUN, MICHAEL
 Name:
 RYLANDER, DONALD

 Address:
 2561 16TH AVE N
 Address:
 1911 2ND AVE N

City-St-Zip: SAINT PETERSBURG, FL 33713 City-St-Zip: SAINT PETERSBURG, FL 33713

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

 Name:
 HINES, ANDREW
 Name:

 Address:
 249 COLONY POINT ROAD
 Address:

 City-St-Zip:
 SAINT PETERSBURG, FL 33705
 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: PRAD RAMPERSAUD EL 02/27/2009