

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714636

FILED
Jan 25, 2004
Secretary of State

Entity Name: FAITH TEMPLE, CHURCH OF CHRIST, INC.

Current Principal Place of Business:

4535 NW 17TH AVENUE
MIAMI, FL 331427920

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 472183
MIAMI, FL 332472183 US

New Mailing Address:

FEI Number: 05-0249800

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWALL J. DAUGHTREY
120 N.E. 71ST STREET, APT. 3
MIAMI, FL 33151

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: SCRUGGS, HANSELL,
Address: 744 NW 49TH ST
City-St-Zip: MIAMI, FL 00000,

Title: D () Delete
Name: PACE, SAMUEL,
Address: 4535 NW 17TH AVE
City-St-Zip: MIAMI, FL 00000,

Title: ASD () Delete
Name: DAUGHTREY, NEWALL J,
Address: 120 N.E. 71ST STREET, APT. 3
City-St-Zip: MIAMI, FL 33151

Title: PD () Delete
Name: TAYLOR, FRED F
Address: 1260 NW 180TH TERRACE
City-St-Zip: MIAMI, FL

Title: SD () Delete
Name: SMITH, TIMOTHY
Address: 17945 NW 5TH COURT
City-St-Zip: MIAMI, FL 33169

Title: ATD () Delete
Name: SIMONE, SPENCER
Address: 1481 NW 103 STREET
City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: SIMONE, SPENCER
Address: 1481 NW 103 STREET
City-St-Zip: MIAMI, FL 33143

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICHARD BUTLER

ATD

01/25/2004

Electronic Signature of Signing Officer or Director

Date