2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Mar 26, 2008 **DOCUMENT#714755** Secretary of State

Entity Name: FAITH BAPTIST CHURCH, INC. OF ORLANDO, FLORIDA

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

500 N BUMBY AVE ORLANDO, FL 32803

Current Mailing Address: New Mailing Address:

500 N BUMBY AVE ORLANDO, FL 32803

FEI Number: 59-6176793 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:

ARGUNA, CECILY WEST, MATTHEW 8841 EL PRADO AVE 415 LOCHMOND DR FERN PARK, FL 32730 US ORLANDO, FL 32825 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: MATTHEW WEST 03/26/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition PHILLIPS, MICHAEL Name: Name: 1859 BARKER DR Address: Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ARGUNA, ARNOLD Name: Address: 8841 EL PRADO AVE Address: City-St-Zip: ORLANDO, FL 32825 City-St-Zip: Title: () Delete Title: () Change () Addition ARGUNA, CECILY Name: Name: 8841 EL PRADO AVE Address: Address: City-St-Zip: ORLANDO, FL 32825 City-St-Zip: Title: () Delete Title: () Change () Addition Name: JENKINS, JACK Name: 2496 GRAND CENTRAL PARKWAY #3 Address: Address: City-St-Zip: ORLANDO, FL 32839 City-St-Zip: Title: () Delete Title: () Change () Addition WEST, MATT Name: Name: 415 LOCHMOND DR Address: Address: City-St-Zip: FERN PARK, FL 32730 City-St-Zip: Title: () Delete Title: () Change () Addition YARBOROUGH, CECIL Name: Name: Address: 411 WESTCHESTER DR Address: CASSELBERRY, FL 32707 City-St-Zip: 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: MATT WEST S 03/26/2008