2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2006
Secretary of State

DOCUMENT# 732719

Entity Name: FAITH OF CHRIST BIBLE REVIVAL CHURCH, INC.

Current Principal Place of Business:

4812 ASHLAND DR
TAMPA, FL 33610

New Principal Place of Business:

Current Mailing Address:

4812 ASHLAND DR
TAMPA, FL 33610

New Mailing Address:

FEI Number: 59-1648361 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CANADA, MOSES
4812 ASHLAND DR
TAMPA, FL 33610 US

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:	T	( ) Delete
Name:	CANADA, FLOYD J	
Address:	4812 ASHLAND DRIVE	
City-St-Zip:	TAMPA, FL	
Title:	T	( ) Delete
Name:	CANADA, SANDRA R	
Address:	4812 ASHLAND DRIVE	
City-St-Zip:	TAMPA, FL	
Title:	PD	( ) Delete
Name:	CANADA, MOSES	
Address:	4812 ASHLAND DRIVE	
City-St-Zip:	TAMPA, FL	
Title:	T	( ) Delete
Name:	CANADA, JACOB A	
Address:	4812 ASHLAND DR	
City-St-Zip:	TAMPA, FL	
Title:	VP	( ) Delete
Name:	TIMOTHY L. CANADA,	
Address:	4812 ASHLAND DR.	
City-St-Zip:	TAMPA, FL	

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:	

I hereby certify that the information supplied with this filing does not qualify for the 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: MOSES CANADA PD 01/13/2006

Electronic Signature of Signing Officer or Director — Date