2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2008 8:00 am
Secretary of State
04-15-2008 90011 033 ****61.25

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1. Entity Name
FAITH MISSION ASSEMBLY OF GOD, INC.

Principal Place of Business	Mailing Address
FAITH ASSEMBLY GOD CHURCH GRACEVILLE, FL 32240	3848 BONY BRIDGE RD GRACEVILLE, FL 32240

50002492

03192008 No Chg-NP CR2E037 (4/08)

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4. FEI Number
59-2250284
☐ Applied For
☐ Not Applicable

6. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

5. Name and Address of Current Registered Agent

FELTER, ALDERMAN JR.
3848 BONY BRIDGE RD
GRACEVILLE, FL 32440

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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.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable [NOTE: Registered Agent signature required if item mentioning]

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	ST
NAME	ALDERMAN JR, FELTER
STREET ADDRESS	3848 BONY BRIDGE RD
CITY-ST-ZIP	GRACEVILLE, FL 32440
TITLE	D
NAME	CAMERON, MIKE
STREET ADDRESS	413 HUGHES DRIVE
CITY-ST-ZIP	DOTHAN, AL 36301
TITLE	D
NAME	JACKSON, MELBA
STREET ADDRESS	3884 BONY BRIDGE RD
CITY-ST-ZIP	GRACEVILLE, FL 32440
TITLE	D
NAME	BERRY, BUDDY
STREET ADDRESS	1154 COLBRETH ROAD Delete
CITY-ST-ZIP	GRACEVILLE, FL 32440
TITLE	P
NAME	CARLTON, JR, CHARLES
STREET ADDRESS	1296 UNDERWOOD RD
CITY-ST-ZIP	GRACEVILLE, FL 32440
TITLE	D
NAME	Wilson, Linda
STREET ADDRESS	1163 Eleanor Road
CITY-ST-ZIP	Graceville, FL 32440

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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 empowered 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 address, with all other like empowered.

SIGNATURE: Felter Alderman Jr