2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#733154

FILED Apr 09, 2009 Secretary of State

Entity Name: FAITH MISSION ASSEMBLY OF GOD, INC.

Current Principal Place of Business: New Principal Place of Business: FAITH ASSEMBLY GOD CHURCH GRACEVILLE, FL 32240 **Current Mailing Address: New Mailing Address:** 3848 BONY BRIDGE RD GRACEVILLE, FL 32240 FEI Number: 59-2250294 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: FELTER, ALDERMAN JR. 3848 BONY BRIDGE RD GRACEVILLE, FL 32440 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ALDERMAN JR, FELTER Name: Name: Address: 3848 BONY BRIDGE RD Address: GRACEVILLE, FL 32440 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition Name: CAMERON, MIKE Name: Address: 413 HUGHES DRIVE Address: City-St-Zip: DOTHAN, AL 36301 City-St-Zip: Title: () Delete Title: () Change () Addition JACKSON, MELBA Name: Name: 3864 BONY BRIDGE RD Address: Address: City-St-Zip: GRACEVILLE, FL 32440 City-St-Zip: () Delete Title: Title: () Change () Addition Name: CARLTON, JR, CHARLES Name: 1296 UNDERWOOD RD Address: Address: City-St-Zip: GRACEVILLE, FL 32440 City-St-Zip: Title: Title: () Delete () Change () Addition WILSON, LINDA Name: Name: 1163 ELEANOR ROAD Address: Address: City-St-Zip: GRACEVILLE, FL 32440 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: FELTER ALDERMAN, JR ST 04/09/2009