## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 737583**

FILED Jan 25, 2007 Secretary of State

Entity Name: FAITH FAMILY WORSHIP CENTER OF PALM CITY, FLORIDA INC.

Current Principal Place of Business:			Now Principal Place	New Principal Place of Business:	
1200 SUNS PALM CITY	ET TRAIL	or Business.	New Fillicipal Flace	or Business.	
Current Ma	ailing Addres	s:	New Mailing Address	New Mailing Address:	
1200 S.W. : PALM CITY	SUNSET TRA , FL 34990	IL US			
FEI Number:	59-2243568	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:					
JONES, RL 1200 SUNS PALM CITY	ET TRAIL	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:					
	Electron	c Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () JONES, RUSS 1200 SUNSET T PALM CITY, FL	Delete RAIL	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () RAYBURN, TER 1437 E MEMOR LAKELAND, FL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () POWELL, STEV 1437 E MEMOR LAKELAND, FL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () BETZER, DAN 1550 COLONIAI FT MYERS, FL	Delete _ BLVD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: REV. RUSS L. JONES P 01/25/2007