

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 09, 2006 08:00 AM
Secretary of State

DOCUMENT # 750489

1. Entity Name
FAITH EVANGELISTIC, INC.



Principal Place of Business
**4074 DIXIANST
BOWLING GREEN FL 33834
US**

Mailing Address
**PO BOX 188
BOWLING GREEN FL 33834
US**

2. Principal Place of Business
4074 Dixianst

3. Mailing Address
PO Box 188

Suite, Apt. #, etc.

City & State
Bowling Green FL

City & State
Bowling Green FL

Zip
33834

Country
Florida

Zip
33834

Country
Florida

1st MOORE CR2E037 (10/05)

4. FEI Number
59-1932920

Applied For Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**MILLER, JAMES W
4074 DIXIANA ST
BOWLING GREEN FL 33834**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL Zip Code

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 *Rev James W Miller* **2-7-06**

Signature typed or printed name of registered agent and fee (if applicable) (NOTE: Registered Agent signature required when reinstating)

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

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

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TO		
TITLE	PD	☐ Delete	TITLE		☐ Change ☐ Add
NAME	MILLER, JAMES W		NAME		
STREET ADDRESS	4074 DIXIANA - PO BOX 188		STREET ADDRESS		
CITY - ST - ZIP	BOWLING GREEN FL 33834		CITY - ST - ZIP		
TITLE	VD	☐ Delete	TITLE		☐ Change ☐ Add
NAME	MILLER, JUDITH ANN		NAME		
STREET ADDRESS	310 W MAIN ST.		STREET ADDRESS		
CITY - ST - ZIP	BOWLING GREEN, FL 00000		CITY - ST - ZIP		
TITLE	STD	☐ Delete	TITLE		☐ Change ☐ Add
NAME	CARTE, EARLENE		NAME		
STREET ADDRESS	HI-WAY 17 SOUTH		STREET ADDRESS		
CITY - ST - ZIP	BOWLING GREEN, FL 00000		CITY - ST - ZIP		
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Add
NAME	NOEL, WILLIE		NAME		
STREET ADDRESS	101 GROVE ST.		STREET ADDRESS		
CITY - ST - ZIP	BOWLING GREEN, FL 00000		CITY - ST - ZIP		
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Add
NAME	MILLER, JAMES W., JR		NAME		
STREET ADDRESS	1142 1/2 DOC COIL RD		STREET ADDRESS		
CITY - ST - ZIP	BOWLING GREEN FL		CITY - ST - ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Add
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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