

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760441

FILED  
Apr 18, 2006  
Secretary of State

Entity Name: FAITH TEMPLE MINISTRIES, INC.

**Current Principal Place of Business:**

6551 GREENFERN LANE  
JACKSONVILLE, FL 32277 US

**New Principal Place of Business:**

**Current Mailing Address:**

6551 GREENFERN LANE  
JACKSONVILLE, FL 32277 US

**New Mailing Address:**

FEI Number: 59-0722784

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DWIGHT, MARTIN D  
6551 GREENFERN LANE  
JACKSONVILLE, FL 32277 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: D ( ) Delete  
Name: OKERSTROM, DAVID E.,  
Address: 3432 STATE ROAD 580-#115  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: DP ( ) Delete  
Name: MARTIN, DWIGHT,  
Address: 6551 GREENFERN LANE  
City-St-Zip: JACKSONVILLE, FL 32277

Title: DV ( ) Delete  
Name: PADLEY, FORREST,  
Address: 1830 49TH AVE. NO  
City-St-Zip: ST PETERSBURG, FL 33714

Title: SDT ( ) Delete  
Name: MARTIN, ANNE F  
Address: 6551 GREENFERN LANE  
City-St-Zip: JACKSONVILLE, FL 32277

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: OKERSTROM, DAVID E  
Address: 3432 STATE ROAD 580-#115  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: DP (X) Change ( ) Addition  
Name: MARTIN, DWIGHT D  
Address: 6551 GREENFERN LANE  
City-St-Zip: JACKSONVILLE, FL 32277

Title: DV (X) Change ( ) Addition  
Name: PADLEY, FORREST  
Address: 1830 49TH AVE. NO  
City-St-Zip: ST PETERSBURG, FL 33714

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: DWIGHT D. MARTIN

P

04/18/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date