

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768831

FILED  
Apr 29, 2009  
Secretary of State

**Entity Name:** FAITH, HOPE AND LOVE APOSTOLIC CORPORATION

**Current Principal Place of Business:**

11945 SW 122 CT  
MIAMI, FL 33186 US

**New Principal Place of Business:**

11944 SW 122 CT  
MIAMI, FL 33186 US

**Current Mailing Address:**

P.O. BOX 16-3355  
MIAMI, FL 331163355 US

**New Mailing Address:**

**FEI Number:** 59-2325788

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EBANKS, LESLIE  
11945 SW 122 COURT  
MIAMI, FL 33186 US

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

EBANKS, LESLIE  
11944 SW 122 COURT  
MIAMI, FL 33186 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: LESLIE EBANKS

04/29/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: FINNERTY, ANTHONY  
Address: PO BOX 3757  
City-St-Zip: LITTLETON, CO 80161

Title: D ( ) Delete  
Name: EBANKS, LESLIE  
Address: PO BOX 16-3355  
City-St-Zip: MIAMI, FL 33116

Title: D ( ) Delete  
Name: COSTIGAN, MICHAEL  
Address: 1242 E. ASCOT AVE  
City-St-Zip: HIGHLANDS RANCH, CO 80126

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: D (X) Change ( ) Addition  
Name: FINNERTY, A  
Address: PO BOX 3757  
City-St-Zip: LITTLETON, CO 80161

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: COSTIGAN, M  
Address: 1242 E. ASCOT AVE  
City-St-Zip: HIGHLANDS RANCH, CO 80126

Title: D ( ) Change (X) Addition  
Name: PHILLIPS, D  
Address: 10332 SW 173 TERRACE  
City-St-Zip: MIAMI, FL 33157

Title: D ( ) Change (X) Addition  
Name: EBANKS, J  
Address: 11944 SW 122 COURT  
City-St-Zip: MIAMI, FL 33186

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: LESLIE EBANKS

PD

04/29/2009

Electronic Signature of Signing Officer or Director

Date