

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

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90204 046 ****70.00

DOCUMENT # 770410

1. Entity Name

FAITH FELLOWSHIP CHURCH, INC.



Principal Place of Business

915 W DESOTO
P.O. BOX 121004
CLERMONT FL 34712-8004

Mailing Address

915 W DESOTO
P.O. BOX 121004
CLERMONT FL 34712-1004
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2326261

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SMITH, DELORIS A
1406 EAST 9TH AVE
MOUNT DORA FL 32757

Name SMITH, DELORIS

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

1 ANITA CT

City SORRENTO,

FL

Zip Code 32776

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

Robert Smith

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

4/19/06

DATE

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

TITLE PD ☒ Delete
NAME WALKER, OMAR
STREET ADDRESS 968 FOREST HILL DR
CITY-ST-ZIP MINNEOLA FL 34715

TITLE VD ☐ Delete
NAME WALKER, BRENDA
STREET ADDRESS 968 FOREST HILL DR
CITY-ST-ZIP MINNEOLA FL 34715

TITLE TD ☐ Delete
NAME SMITH, PHILLIP
STREET ADDRESS 1406 EAST 9TH AVE
CITY-ST-ZIP MOUNT DORA FL 32757

TITLE SD ☐ Delete
NAME SMITH, DELORIS
STREET ADDRESS 1406 EAST 9TH AVE
CITY-ST-ZIP MOUNT DORA FL 32757

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE TD ☒ Change ☐ Addition
NAME SMITH, PHILLIP
STREET ADDRESS 1 ANITA CT
CITY-ST-ZIP SORRENTO FL, 32776

TITLE SD ☒ Change ☐ Addition
NAME SMITH, DELORIS
STREET ADDRESS 1 ANITA CT
CITY-ST-ZIP SORRENTO, FL. 32776

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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.

SIGNATURE: DELORIS SMITH

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-3-06

Date

(352) 385-1762

Daytime Phone #