

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000065575

FILED
Apr 08, 2009
Secretary of State

Entity Name: FAITH WALK, LLC

Current Principal Place of Business:

3687 CORAL TREE CIRCLE
COCONUT CREEK, FL 33073 US

New Principal Place of Business:

2235 NW 45TH AVE
COCONUT CREEK, FL 33066 US

Current Mailing Address:

3687 CORAL TREE CIRCLE
COCONUT CREEK, FL 33073 US

New Mailing Address:

2235 NW 45TH AVE
COCONUT CREEK, FL 33066 US

FEI Number: 20-3209041

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPARKS, MONIQUE M
3687 CORAL TREE CIRCLE
COCONUT CREEK, FL 33073 US

Name and Address of New Registered Agent:

SPARKS, MONIQUE M
2235 NW 45TH AVE
COCONUT CREEK, FL 33066 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: MONIQUE SPARKS

04/08/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SPARKS, MONIQUE M
Address: 3687 CORAL TREE CIRCLE
City-St-Zip: COCONUT CREEK, FL 33073 US

Title: MGRM () Delete
Name: BATTLE, GINA
Address: 4605 PALADIN CIRCLE
City-St-Zip: VERO BEACH, FL 32967 US

Title: MGRM () Delete
Name: BATTLE, RASUL
Address: 4605 PALADIN CIRCLE
City-St-Zip: VERO BEACH, FL 32967 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SPARKS, MONIQUE M
Address: 2235 NW 45TH AVE
City-St-Zip: COCONUT CREEK, FL 33066 US

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

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

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MONIQUE SPARKS

MGRM

04/08/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date