

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

FILED
Jan 26, 2006 8:00 am
Secretary of State

01-26-2006 90041 039 ****61.25

DOCUMENT # N00000000912

1. Entity Name

TRUE FAITH CHRISTIAN FELLOWSHIP INC.



Principal Place of Business

45019 PETREE ROAD
CALLAHAN FL 32011

Mailing Address

P. O. BOX 977
CALLAHAN FL 32011



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

59-3622145

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BEASLEY, CYNDI B
35439 QUAIL RD.
CALLAHAN FL 32011

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

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

(NOTE: Registered Agent signature required when reinstating)

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 WILLARD, QUINTON N
STREET ADDRESS 44768 WOODRIDGE DRIVE
CITY-ST-ZIP CALLAHAN FL 32011

TITLE VPD ☐ Delete
NAME SPEARS, JOHN W
STREET ADDRESS 3457 WASHBURN ROAD
CITY-ST-ZIP JACKSONVILLE FL 32250

TITLE ST ☐ Delete
NAME WILLARD, LINDA D
STREET ADDRESS 44768 WOODRIDGE DRIVE
CITY-ST-ZIP CALLAHAN FL 32011

TITLE BMPD ☐ Delete
NAME ELWOOD, KENNY
STREET ADDRESS 49085 CANYON CREEK RD.
CITY-ST-ZIP HILLIARD FL 32046

TITLE BMT ☐ Delete
NAME KEARNEY, BILL
STREET ADDRESS 3677 CEDAR AVE.
CITY-ST-ZIP YULEE FL 32097

TITLE BMT ☒ Delete
NAME CARROLL, J. R.
STREET ADDRESS 3052 CARROLL'S CORNER
CITY-ST-ZIP HILLIARD FL 32046

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME 35101 Chestnut Ln.
STREET ADDRESS Callahan, FL. 32011
CITY-ST-ZIP

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

TITLE ☒ Change ☐ Addition
NAME 35101 Chestnut Ln.
STREET ADDRESS Callahan, FL. 32011
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 Bmt Nettles, Earl
STREET ADDRESS 55453 Cravey Rd.
CITY-ST-ZIP Callahan, FL. 32011

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: Cyndi B. Beasley Cyndi B. Beasley 1-17-06 904-879-5937