2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008545

Entity Name: GREATER FAITH CENTER, INC.

FILED May 08, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

475 S JOHN RODES BLVD BLDG 4 MELBOURNE, FL 32904

New Mailing Address: Current Mailing Address:

PO BOX 120998 MELBOURNE, FL 32912

FEI Number: 59-3691892 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GREGORY, BRIAN J GREGORY, BRIAN J 2647 BRADFORDT DRIVE 1074 BRYCE LANE

WEST MELBOURNE, FL 32904 US WEST MELBOURNE, FL 32904 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: BRIAN J GREGORY 05/08/2004

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

1074 BRYCE LANE

() Delete (X) Change () Addition Name:

GREGORY, BRIAN J GREGORY, BRIAN J Name: 2647 BRADFORT DRIVE Address: 1074 BRYCE LANE Address:

City-St-Zip: WEST MELBOURNE, FL 32904 City-St-Zip: WEST MELBOURNE, FL 32904

Title: Title: (X) Change () Addition () Delete GREGORY, JULIE A Name: Name: GREGORY, JULIE A

Address: 2647 BRADFORDT DRIVE Address: 1074 BRYCE LANE

City-St-Zip: WEST MELBOURNE, FL 32904 City-St-Zip: WEST MELBOURNE, FL 32904

Title: () Delete Title: (X) Change () Addition GREGORY, MARGARET J Name: GREGORY, MARGARET J Name:

100 PINE FOREST DRIVE Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: WEST MELBOURNE, FL 32904

Title: DT () Delete Title: DT (X) Change () Addition

GREGORY, JAMES A GREGORY, JAMES A Name: Name: 100 PINE FOREST PLACE Address: Address: 1074 BRYCE LANE City-St-Zip: APOPKA, FL 32712 City-St-Zip: WEST MELBOURNE, FL 32904

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

SIGNATURE: BRIAN J GREGORY Ρ 05/08/2004