

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006108

FILED
Apr 07, 2008
Secretary of State

Entity Name: CATHEDRAL OF FAITH IN ACTION MINISTRIES INC.

Current Principal Place of Business:

518 SOUTH DISSTON AVE
TARPON SPRINGS, FL 34689

New Principal Place of Business:

Current Mailing Address:

3925 N CALEDONIA DRIVE
BEVERLY HILLS, FL 34465

New Mailing Address:

FEI Number: 52-2331039

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FISHER, LEONARD JR
3925 N CALEDONNA DR
BEVERLY HILLS, FL 34465 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FISHER, SONYA A
Address: 3925 N CALEDONNA DR
City-St-Zip: BEVERLY HILLS, FL 34465

Title: V () Delete
Name: FISHER, LEONARD JR
Address: 3925 N CALEDONNA DR
City-St-Zip: BEVERLY HILLS, FL 34465

Title: ST () Delete
Name: MILES, MAGGIE B
Address: 518 S DISSTON AVENUE
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: D () Delete
Name: MOUZON, VIVIAN
Address: 5299 SOUTH BLANCA POINT
City-St-Zip: HOMOSASSA, FL 34446 US

Title: T () Delete
Name: MATHIS, MONSHADEE S T
Address: 518 SOUTH DISSTON AVE,
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: CT () Delete
Name: BURCH, GARY I CT
Address: 6114 MAPLEWOOD DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34635 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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City-St-Zip:

Title: () Change () Addition
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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 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: SONYA A. FISHER

O/D

04/07/2008

Electronic Signature of Signing Officer or Director

Date