## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000006888

FILED Jan 17, 2009 Secretary of State

Entity Name: TRUE FAITH CHURCH OF GOD AND CHRIST FOUNDATION, INC.

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

1700 WEST 18TH STREET 3825 HEATH CIRCLE SOUTH RIVIERA BEACH, FL 33404 WEST PALM BEACH, FL 33407

**Current Mailing Address: New Mailing Address:** 

1700 WEST 18TH STREET 3825 HEATH CIRCLE SOUTH RIVIERA BEACH, FL 33404 WEST PALM BEACH, FL 33407

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

WILLIAMS, JACK

WILLIAMS, JACK 301 WEST 37TH STREET 1760 WEST 18TH STREET US WEST PALM BEACH, FL 33404 US RIVIERA BEACH, FL 33404

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: JACK WILLIAMS 01/17/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

WILLIAMS, JACK WILLIAMS, JACK Name: Name: 1700 WEST 18TH STREET Address: 301 WEST 37TH STREET Address: City-St-Zip: RIVIERA BEACH, FL 33404 City-St-Zip: RIVIERA BEACH, FL 33404

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

Name: CIGGS, BARBARA Name: CIGGS, BARBARA

Address: 1700 WEST 18TH STREET Address: 1111 CENTER STONE LANE City-St-Zip: RIVIERA BEACH, FL 33404 City-St-Zip: RIVIERA BEACH, FL 33404

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

BUTLER, OLIVIA Name: BUTLER, OLIVIA Name: 1700 WEST 18TH STREET 3825 HEATH CIRCLE SOUTH Address: Address: City-St-Zip: RIVIERA BEACH, FL 33404 City-St-Zip: WEST PALM BEACH, FL 33407

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: OLIVIA J. BUTLER SECT 01/17/2009