2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N01000007438 .

1. Entity Name
ALL FAITH BAPTIST CHAPEL, INC.

Principal Place of Business	Mailing Address
302 LONGFELLOW BLVD LAKELAND, FL 33801	PO BOX 91838 LAKELAND, FL 33804-1838

DO NOT WRITE IN THIS SPACE

01252007 No Chg-NP   CR2E037 (4/06)

4. FEI Number	Applied For
65-1150258	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

RHODES, HARRY
6919 RANCH RD
LAKELAND, FL 33809-2270

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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

Filing Fee is $61.25 **Due by May 1, 2007**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	

10.   OFFICERS AND DIRECTORS

TITLE	D
NAME	RHODES, EUNICE M
STREET ADDRESS	6919 RANCH ROAD
CITY-ST-ZIP	LAKELAND, FL 338092270
TITLE	D
NAME	FRANKS, OLA
STREET ADDRESS	713 ROSE ST, #49
CITY-ST-ZIP	AUBURNDALE, FL 33823
TITLE	D
NAME	RHODES, HARRY J
STREET ADDRESS	6919 RANCH ROAD
CITY-ST-ZIP	LAKELAND, FL 338092270
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/31/07-80011-013 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _Harry J. Rhodes_ 1/25/07 863/858-9620

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #