

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01392

FILED
Jan 05, 2005
Secretary of State

Entity Name: THE FAMILY CHRISTIAN ASSOCIATION OF AMERICA, INC

Current Principal Place of Business:

14701 N.W. 7 AVENUE
MIAMI, FL 331683103 US

New Principal Place of Business:

Current Mailing Address:

14701 N.W. 7 AVENUE
MIAMI, FL 331683103 US

New Mailing Address:

FEI Number: 59-2371125 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILLIAMS, HERMAN K.
218 NE 199 TERRACE
MIAMI, FL 33179 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: CD () Delete
Name: DUFFIE, ESSIE C
Address: 195 NE 160TH STREET
City-St-Zip: MIAMI, FL 33162

Title: S () Delete
Name: JONES, REBECCA
Address: 20389 NE 7TH COURT
City-St-Zip: MIAMI, FL 33179

Title: TD () Delete
Name: HARRIS, TIM
Address: 19221 W. ST. ANDREW DRIVE
City-St-Zip: MIAMI, FL 33015

Title: VD () Delete
Name: WYCHE, KERMIT
Address: 19274 NW 12TH ST
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VD () Delete
Name: ADDERLY, T.C. JR
Address: 1885 NW 14TH AVENUE RD
City-St-Zip: MIAMI, FL 33169

Title: PD () Delete
Name: WILLIAMS, HERMAN K.,
Address: 218 NE 199 TERR
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: () Change () Addition
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Address:
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 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.

SIGNATURE: HERMAN K. WILLIAMS

Electronic Signature of Signing Officer or Director

PRES

01/05/2005

Date