

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002018

FILED
Apr 27, 2007
Secretary of State

Entity Name: THE BODY OF CHRIST MINISTRY OF FAITH, INC.

Current Principal Place of Business:

14221 N.W. 156TH PLACE
ALACHUA, FL 32616

New Principal Place of Business:

Current Mailing Address:

PO BOX 2176
ALACHUA, FL 32616

New Mailing Address:

FEI Number: 50-0002617

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUNT, CHARLES R
14221 N.W. 156TH PLACE
ALACHUA, FL 32616 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: DP () Delete
Name: HUNT, CHARLES R
Address: P.O. BOX 2176
City-St-Zip: ALACHUA, FL 32616

Title: D () Delete
Name: HUNT, KIMBERLY
Address: P.O. BOX 181
City-St-Zip: ALACHUA, FL 32616

Title: D () Delete
Name: KASEY, ROSS
Address: P.O. BOX 654
City-St-Zip: ALACHUA, FL 32616

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:

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: KIMBERLY A. HUNT

D

04/27/2007

Electronic Signature of Signing Officer or Director

Date