2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2006
Secretary of State

DOCUMENT# N02000002119

Entity Name: HOUSE OF FAITH, INC.

Current Principal Place of Business:

15221 U.S. 19
HUDSON, FL 34667

New Principal Place of Business:

Current Mailing Address:

15221 U.S. 19
HUDSON, FL 34667

New Mailing Address:

FEI Number: 75-3035428 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GONZALEZ, JOHN M
8430 KENWAY ST
SPRING HILL, FL 34609 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: PD ( ) Delete
Name: PICKENS, JAMES R
Address: 9223 DUFFER CT
City-St-Zip: HUDSON, FL 34667

Title: VTD ( ) Delete
Name: GONZALEZ, JOHN M
Address: 8430 KENWAY ST.
City-St-Zip: SPRING HILL, FL 34609

Title: SD ( ) Delete
Name: PICKENS, PATRICIA A
Address: 9223 DUFFER CT.
City-St-Zip: HUDSON, FL 34667

Title: D ( ) Delete
Name: ADAMS, CALVERT H JR
Address: 18811 FIRETHORN DR
City-St-Zip: SPRING HILL, FL 34611

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
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 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: JAMES R. PICKENS PD 01/04/2006

Electronic Signature of Signing Officer or Director — Date