2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000004477

1040 MAIN ST., LOT 190

DUNEDIN, FL 34698

Address:

City-St-Zip:

Entity Name: FAITH MISSIONS INC

FILED Apr 30, 2003 Secretary of State

	TATTIME CICIO INC.			
Current P	rincipal Place of Business:	New Principal Place o	New Principal Place of Business:	
6495 SEALAWN DR. SPRING HILL, FL 34606		14312 17TH STREET DADE CITY, FL 33523	;	
Current M	lailing Address:	New Mailing Address	New Mailing Address:	
6495 SEALAWN DR. SPRING HILL, FL 34606		14312 17TH STREET DADE CITY, FL 33523	14312 17TH STREET DADE CITY, FL 33523	
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	Name and Address of New Registered Agent:	
SPRING H	i, BOB LAWN DR. IILL, FL 34606 named entity submits this statement for the e of Florida.	e purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI				
Electronic Signature of Registered Age		gent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete BOWLING, BOBBY R 6495 SEALAWN DR. SPRING HILL, FL 34606	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete MANN, JEFF 5019 LARCH LANE NEW PORT RICHEY, FL 34653	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D () Delete HUTCHINS, DON	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: BOBBY R. BOWLING DIR 04/30/2003