


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2005 08:00 AM
Secretary of State

DOCUMENT # N02000006081	
1. Entity Name FAITH TEMPLE PENTECOSTAL FIRST BORN CHURCH OF WEST HOLLYWOOD INC.	

Principal Place of Business 5901 SW 25TH STREET WEST HOLLYWOOD, FL 33023-4094	Mailing Address 5901 SW 25TH STREET WEST HOLLYWOOD, FL 33023-4094
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02212005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 51-0419743	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent DENNARD, ALLEN REV. 5901 SW 25TH STREET WEST HOLLYWOOD, FL 33023-4094

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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, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD DENNARD, ALLEN REV. PO BOX 16-0795 MIAMI, FL 33116
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD PEW, DAISY 3480 NW 207TH STREET MIAMI, FL 33056
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D RICHARDSON, MAMIE 21000 NW 31ST AVENUE MIAMI, FL 33056
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HEM, CHARITY 5901 SW 25TH STREET WEST HOLLYWOOD, FL 33023-4094
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Allen Dennard **ALLEN DENNARD** 3-7-05 305/283-5872
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #