2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006955

FILED Jul 26, 2006 Secretary of State

Entity Name: OBEDIENCE IN FAITH COMMUNITY DEVELOPMENT, INC.

		New Principal Place of Business:
330 OLIVE PENSACO	ERD DLA, FL 32514	
	,	
Current N	lailing Address:	New Mailing Address:
330 OLIVE PENSACC	ERD DLA, FL 32514	
n accordan	: 61-1429752 FEI Number Applied For (ice with s. 607.193(2)(b), F.S., the corporation	did not receive the prior notice.
Name and	I Address of Current Registered Age	nt: Name and Address of New Registered Agent:
330 OLIVE	F, MELVIN ERD DLA, FL 32514 US	
	e named entity submits this statement for e of Florida.	r the purpose of changing its registered office or registered agent, or both,
SIGNATU		
	Electronic Signature of Registere	ed Agent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	P () Delete BURNETT, MELVIN 108 BERKLEY DR PENSACOLA, FL 32503	Title: () Change () Addition Name: Address: City-St-Zip:
Name: Address:	S () Delete BURNETT, WILMA 108 BERKLEY DR PENSACOLA, FL 32503	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	BURNETT, WÌLMA 108 BERKLEY DR	Name: Address:
Name: Address: City-St-Zip: Title: Name: Address:	BURNETT, WILMA 108 BERKLEY DR PENSACOLA, FL 32503 T () Delete ROBINSON, DORIS 7344 TANNEHILL DRIVE	Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	BURNETT, WILMA 108 BERKLEY DR PENSACOLA, FL 32503 T () Delete ROBINSON, DORIS 7344 TANNEHILL DRIVE PENSACOLA, FL 32526 D () Delete ISHMAEL, EDDIE 1000 WEST MORENO STREET	Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:

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: DORIS L. ROBINSON T 07/26/2006