
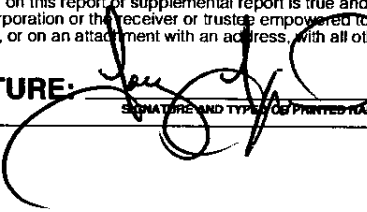


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 26, 2004 8:00 am**  
**Secretary of State**

04-26-2004 90449 048 \*\*\*\*\*70.00

<b>DOCUMENT # N03000003376</b> 1. Entity Name <b>MILLENNIUM FAITH-BASED ALLIANCE CORPORATION</b>					
Principal Place of Business <b>1897 PALM BEACH LAKES BLVD., STE. 203/204 WEST PALM BEACH, FL 33409</b>				Mailing Address <b>1897 PALM BEACH LAKES BLVD., STE. 203/204 WEST PALM BEACH, FL 33409</b>	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 04212004 Chg-NP CR2E037 (10/03)	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>TIPTON, TOMMY SR. 501 S. CONGRESS AVE. WEST PALM BEACH, FL 33409</b>				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	TIPTON, TOMMY SR.		NAME		
STREET ADDRESS	501 S. CONGRESS AVE.		STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH, FL 33409		CITY-ST-ZIP		
TITLE	VD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	THICKLIN, J.R.		NAME		
STREET ADDRESS	P.O. BOX 336		STREET ADDRESS		
CITY-ST-ZIP	BELLE GLADE, FL 33430		CITY-ST-ZIP		
TITLE	TD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ELLIOTT, HAROLD		NAME		
STREET ADDRESS	4987 PINE CONE LANE		STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH, FL 33417		CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	TIPTON, LAVERNE		NAME		
STREET ADDRESS	905 VILLAGE BLVD., PMB-83		STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH, FL 33409		CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	NEWBOLD, MYRTLE		NAME		
STREET ADDRESS	P.O. BOX 223153		STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH, FL 33422		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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.					
<b>SIGNATURE:</b> 			<b>Tommy TIPTON</b>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: <b>4/21/04</b> Daytime Phone #: <b>561-686-8598</b>		