2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2007
Secretary of State

DOCUMENT# N03000008651

Entity Name: FIRST CHURCH FIVE-FOLD FELLOWSHIP MINISTRIES, INC.

Current Principal Place of Business:

1301 SW BAYSHORE BLVD
PORT SAINT LUCIE, FL 34985

New Principal Place of Business:

Current Mailing Address:

3900 SW HAINLIN ST
PORT SAINT LUCIE, FL 34953

New Mailing Address:

FEI Number: 54-2129367 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

APPLEBY, HOMER P
ONE PARK PLACE, 621 NW 53RD ST., STE. 240
BOCA RATON, FL 33487 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: P ( ) Delete
Name: WHITAKER, VERNON
Address: 3900 SW HAINLIN ST
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: V ( ) Delete
Name: WHITAKER, BETTY
Address: 3900 SW HAINLIN ST
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: T ( ) Delete
Name: DAVIS, ANDREA
Address: 11661 WEST ATLANTIC UNIT 1003
City-St-Zip: CORAL SPRINGS, FL 33071

Title: S ( ) Delete
Name: JOHNSON, KENYA
Address: 1307 SE WALTON LAKES DR
City-St-Zip: PORT SAINT LUCIE, FL 34952

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: VERNON WHITAKER P 04/05/2007

Electronic Signature of Signing Officer or Director — Date