2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010440

Entity Name: FAITHWAY FAMILY COMMUNITY CHURCH, INC.

FILED May 02, 2004 Secretary of State

Current Pr	incipal Place	of Business:	New Princ	New Principal Place of Business:		
	1ST MANOR E PINES, FL	33027				
Current Mailing Address:			New Mailing Address:			
	1ST MANOR E PINES, FL	33027				
FEI Number: 20-0450794 FEI Number Applied For () FE			FEI Number Not Appl	I Number Not Applicable () Certificate of Status Desired (X)		
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
	MELA S 1ST MANOR E PINES, FL	33027 US				
The above in the State		submits this statement for the pu	urpose of changing i	ts registered office or	registered agent, or both,	
SIGNATUR	RE:					
Electronic Signature of Registered Agent			nt		Date	
OFFICERS AND DIRECTORS:			ADDITION	IS/CHANGES TO OF	FICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	FOLAND, RAND 11276 NW 14TI		Title: Name: Address: City-St-Zip:	D (X) Change FOLAND, RANDALL G 11276 NW 14TH COUR PEMBROKE PINES, FL		
Title: Name: Address: City-St-Zip:	LOPEZ, PAMEL 16899 SW 1ST		Title: Name: Address: City-St-Zip:	D/P (X) Change CORDERO, RAUL G 1328 NW 157TH AVE PEMBROKE PINES, FL	() Addition	
Title: Name: Address: City-St-Zip:	KONG, JEANET 619 NW 156TH		Title: Name: Address: City-St-Zip:	D/T (X) Change KONG, JEANETTE M 619 NW 156TH AVENU PEMBROKE PINES, FL		
Title: Name: Address: City-St-Zip:	RASBERRY, DI 5250 SW 111TI		Title: Name: Address: City-St-Zip:	()Change	() Addition	
Title: Name: Address: City-St-Zip:	VANELLA, LEÓ 10428 NW 3RD		Title: Name: Address: City-St-Zip:	()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.

SIGNATURE: RAUL G CORDERO P 05/02/2004