

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000679

FILED  
Feb 08, 2006  
Secretary of State

**Entity Name:** HOUSEHOLD OF FAITH COMMUNITY CENTER, INC

**Current Principal Place of Business:**

1410 W EDGEWOOD AVE  
JACKSONVILLE, FL 32208

**New Principal Place of Business:**

**Current Mailing Address:**

1410 W EDGEWOOD AVE  
JACKSONVILLE, FL 32208

**New Mailing Address:**

**FEI Number:** 87-0716381

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FREDRICK, IRENE W  
3131 SEINE DR  
JACKSONVILLE, FL 32208 US

**Name and Address of New Registered Agent:**

FREDERICK, IRENE W  
3131 SEINE DR  
JACKSONVILLE, FL 32208 US

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: IRENE W. FREDERICK

02/08/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: WILLIAMS, LEWIS  
Address: 1853 KEY BISCAYNE DR N  
City-St-Zip: JACKSONVILLE, FL 32218

Title: DV ( ) Delete  
Name: WILLIAMS, BERNADETTE  
Address: 1853 KEY BISCAYNE DR N  
City-St-Zip: JACKSONVILLE, FL 32218

Title: DS ( ) Delete  
Name: MYLES, JUDY R  
Address: 805 CALVERT ST.  
City-St-Zip: JACKSONVILLE, FL 32208

Title: DT ( ) Delete  
Name: TATE, ANDREW III  
Address: 2016 BO PEEP DR.W.  
City-St-Zip: JACKSONVILLE, FL 32210

**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: BERNADETTE R. WILLIAMS

DV

02/08/2006

Electronic Signature of Signing Officer or Director

Date