

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002319

FILED
Mar 20, 2009
Secretary of State

Entity Name: FAITHFUL MEN, INC.

Current Principal Place of Business:

7615 GLOUCESTER LANE
PARKLAND, FL 33067

New Principal Place of Business:

Current Mailing Address:

7615 GLOUCESTER LANE
PARKLAND, FL 33067

New Mailing Address:

FEI Number: 42-1620254

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WODA, JERRY W
7615 GLOUCESTER LANE
PARKLAND, FL 33067 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, D () Delete
Name: SWANSON, PETE
Address: 9794 ROYAL PALM BLVD.
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: S, T () Delete
Name: WODA, JERRY W
Address: 7615 GLOUCESTER LANE
City-St-Zip: PARKLAND, FL 33067 US

Title: D () Delete
Name: THALIN, JEFF
Address: 1803 NW 80TH AVENUE
City-St-Zip: MARGATE, FL 33063 US

Title: D (X) Delete
Name: COUTTS, JAY
Address: 8001 N. UPPER RIDGE DR.
City-St-Zip: PARKLAND, FL 33067 US

Title: VPD () Delete
Name: MEYER, JAY
Address: 9506 NW 37TH AVENUE
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: D () Delete
Name: SALISTEAN, DAN
Address: 1836 NW 69TH AVENUE
City-St-Zip: MARGATE, FL 33063 US

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
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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 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: JERRY W WODA

SEC

03/20/2009

Electronic Signature of Signing Officer or Director

Date