2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005137

Entity Name: FAMILY OF FAITH INC.

FILED Mar 04, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

105 W. MARTIN LUTHER KING BLVD TAMPA, FL 33603

Current Mailing Address: New Mailing Address:

105 W. MARTIN LUTHER KING BLVD PO BOX 360513 TAMPA, FL 33603 TAMPA, FL 33603

FEI Number: 02-0723372 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

ECHEVARRIA, MITCHELL A ECHEVARRIA, MITCHELL A PRES 1904 FRUITRIDGE STREET 1904 FRUITRIDGE STREET BRANDON, FL 33510 BRANDON, FL 33510

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: MITCHELL A. ECHEVARRIA 03/04/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

BRANDON, FL 33510

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

BRANDON, FL 33510

PRE (X) Change () Addition () Delete ECHEVARRIA, MITCHELL A ECHEVARRIA, MITCHELL A PRESIDE Name: Name: 1904 FRUITRIDGE STREET Address: 1904 FRUITRIDGE STREET Address:

City-St-Zip: BRANDON, FL 33510 City-St-Zip: BRANDON, FL 33510

Title: () Delete Title: (X) Change () Addition ECHEVARRIA, MICHAEL A Name: ECHEVARRIA, MICHAEL A VICE PR Name:

Address: 130 LADY SUSAN CT Address: 130 LADY SUSAN CT City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: CASSELBERRY, FL 32707

Title: () Delete Title: ADMI (X) Change () Addition MALAVE, AMARILIS MARTIN, PHYLLIS S ADMINIS Name: Name: 105 W. MARTIN LUTHER KING BLVD. 12265 ARMENIA GABLES CIRCLE Address: Address:

City-St-Zip: TAMPA, FL 33603 City-St-Zip: TAMPA, FL 33612

Title: () Delete Title: (X) Change () Addition Name: VILLEGAS, MARIA M Name: VILLEGAS, MARIA M TREASU 1904 FRUITRIDGE STREET 1904 FRUITRIDGE STREET Address: Address: City-St-Zip: BRANDON, FL 33510 City-St-Zip: BRANDON, FL 33510

Title: () Delete Title: HOS (X) Change () Addition VAZQUEZ, ADA VAZQUEZ, ADA HOSPITA Name: Name:

1904 FRUITRIDGE STREET 1904 FRUITRIDGE STREET Address: Address: BRANDON, FL 33510 City-St-Zip: City-St-Zip: BRANDON, FL 33510

Title: () Delete Title: (X) Change () Addition OJEDA, MARIA E OJEDA. MARIA E ELDER Name: Name: Address: 1904 FRUITRIDGE STREET Address: 1904 FRUITRIDGE STREET

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.

City-St-Zip:

SIGNATURE: MITCHELL A. ECHEVARRIA **PRES** 03/04/2009

Electronic Signature of Signing Officer or Director

Date