## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # N04000005948** 

APPROVEL AND FILED

05 SEP -7 AM 9: 22

1. Entity Name COMMUNITY OF FAITH CHURCH, INC.								SECRETARY OF STATE TALL AHASSEE, FLORIDA			
% 1882 CAPITAL CIRCLE NE % 18 Suite 206 Suiti			ng Address 1882 Capital Circle NE TE 206 Lahassee, Fl. 32308			& 100711PE 011 W	***************************************			ri <b>hi d</b> i radi	
2. Principal Place of Business 3. Ma			ailing Address								
Suite, Apr. #, etc.		Su	Suite, Apt. #, etc.			09072005	Chg-NP	CR2E03	17 (10/03)		
		Cit	City & State			4. FEI Number	19995	230		plied For t Applicable	
Zip	Country 2		Ziş	Country			5. Certificate of Status Desired \$8.75 Additional Fee Required				
6. Name and Address of Current Register						7. Name and Address of New Registered Agent					
BISBEE, H. RICHARD ESQ. 1882 CAPITAL CIRCLE NE SUITE 206					Street Address (P.O. Box Number is Not Acceptable)						
TALLAHAS	SSEE, FL	32308									
			<del> </del>	City	City FL Zip Code						
	named entity ions of regist	y submits this statemen ered agent.	t for the purp	ose of changing its re	egistered office o	r register	red agent, or both	i, in the State of F	Florida. I am	familiar with,	and accept
SIGNATURE.	Signature, typed	or printed name of registered ag	ent and title if ap	Dicable, (NOTE:	Registered Agent signa	ture required	d when reinstating)		DATE	<del></del>	
	•	e is \$61.25 stember 7, 2005		9. Election Camp Trust Fund Co	entribution.		\$5.00 May Be Added to Fees	Fic	rida Depar	c payable to tment of St	ate
10.	ue by Sep		DIRECTORS	Trust Fund Co	ntribution.		\$5.00 May Be Added to Fees ADDITIONS/CHA	Fic	rida Depar	tment of St RECTORS IN	ate 10
10.	P Sep	OFFICERS AND	DIRECTORS	Trust Fund Co	11.		Added to Fees ADDITIONS/CHA	NGES TO OFFIC	erida Depar ERS AND DI	tment of St	ate
10.	P MCFADD	OFFICERS AND	DIRECTORS	Trust Fund Co	ntribution.		Added to Fees ADDITIONS/CHA	NGES TO OFFIC	erida Depar ERS AND DI	tment of St RECTORS IN	ate 10
10. TITLE NAME	P MCFADD 9141 SEA	OFFICERS AND	DIRECTORS	Trust Fund Co	11. TITLE NAME	Val	Added to Fees ADDITIONS/CHA erie Wa 18 Olsov	NGES TO OFFICE	erida Depar ERS AND DI	tment of St RECTORS IN	ate 10
10. TITLE NAME STREET ADDRESS	P MCFADD 9141 SEA	OFFICERS AND OFFICERS AND EN, CALVIN J FAIR LANE	DIRECTORS	Trust Fund Co	11. TITLE NAME STREET ADDRESS	Val	Added to Fees ADDITIONS/CHA	NGES TO OFFICE	erida Depar ERS AND DI	tment of St RECTORS IN	ate 10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P MCFADD 9141 SEA TALLAHA V HOLCOM	OFFICERS AND OFFICERS AND EN, CALVIN J FAIR LANE SSEE, FL 32317	DIRECTORS	Trust Fund Co	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Val	Added to Fees  ADDITIONS/CHA  Erie Wh  118 Olsor  Mahusser	NGES TO OFFICE Landing Landing	orida Depar ERS AND DI Y Pd.	tment of St RECTORS IN Change Change	10  Landition  Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P MCFADD 9141 SEA TALLAHA V HOLCOM 1558 SPR	OFFICERS AND OFFICERS AND EN, CALVIN J FAIR LANE SSEE, FL 32317 B, KYM RUCE WOOD TR.	DIRECTORS	Trust Fund Co	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Val	Added to Fees  ADDITIONS/CHA  Erie Wh  118 Olsor  Mahusser	NGES TO OFFICE Landing Landing	orida Depar ERS AND DI Y Pd.	tment of St RECTORS IN Change Change	10  Landition  Addition
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10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCFADD 9141 SEA TALLAHA V HOLCOM 1558 SPR TALLAHA S GOODLO	OFFICERS AND OFFICERS AND EN, CALVIN J FAIR LANE SSEE, FL 32317 B, KYM RUCE WOOD TR.	DIRECTORS	Trust Fund Co	TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP	Val	Added to Fees  ADDITIONS/CHA  Erie Wh  118 Olsor  Mahusser	NGES TO OFFICE Landing Landing	orida Depar ERS AND DI Y Pd.	tment of St RECTORS IN Change Change	10 PAddition
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10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P MCFADD 9141 SEA TALLAHA V HOLCOM 1558 SPE TALLAHA S GOODLO 457 SAN TALLAHA T SINCLAIF	OFFICERS AND OFFICERS AND EN, CALVIN J IFAIR LANE ISSEE, FL 32317 IB, KYM RUCE WOOD TR. ISSEE, FL 32311 IDE, BRENDA P MARTIN DR. ISSEE, FL 32312 IR, MARGO	DIRECTORS	Trust Fund Co	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Day	Added to Fees  ADDITIONS/CHA  Erie Wh  118 Olsor  Mahusser	NGES TO OFFICE Landing Landing	orida Depar ERS AND DI Y Pd.	tment of St RECTORS IN Change Change Change **70.1	10 10 19 Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P MCFADD 9141 SEA TALLAHA V HOLCOM 1558 SPR TALLAHA S GOODLO 457 SAN TALLAHA T SINCLAIR 2855 APA	OFFICERS AND  OFFICERS AND  EN, CALVIN J  FAIR LANE SSEE, FL 32317  B, KYM RUCE WOOD TR. SSEE, FL 32311  E, BRENDA P MARTIN DR. SSEE, FL 32312  R, MARGO ALACHEE PKWY	DIRECTORS	Trust Fund Co	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Day	Added to Fees  ADDITIONS/CHA  Erie Wh  118 Olsor  Mahusser	NGES TO OFFICE Landing Landing	orida Depar ERS AND DI Y Pd.	tment of St RECTORS IN Change Change Change **70.1	10 10 19 Addition Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P MCFADD 9141 SEA TALLAHA V HOLCOM 1558 SPR TALLAHA S GOODLO 457 SAN TALLAHA T SINCLAIF 2855 APA TALLAHA D HANKER 4457 WE	OFFICERS AND OFFICERS AND EN, CALVIN J IFAIR LANE ISSEE, FL 32317 IB, KYM RUCE WOOD TR. ISSEE, FL 32311 IE, BRENDA P MARTIN DR. ISSEE, FL 32312 IR, MARGO ALACHEE PKWY ISSEE, FL 32301 ISSON, EARL J SLEY DR	DIRECTORS	Trust Fund Co	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Day	Added to Fees  ADDITIONS/CHA  Erie Wh  118 Olsor  Mahusser	NGES TO OFFICE Landing Landing	orida Depar ERS AND DI Y Pd.	tment of St RECTORS IN Change Change ***70.1	10 10 19 Addition  Addition  Addition
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attackment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/7/05

850-545-1165 Daytrne Phone #