2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007315

Entity Name: FAITH COVENANT MINISTRIES, INC.

FILED Jul 29, 2007 Secretary of State

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

6252 COMMERCIAL WAY #211 6252 COMMERCIAL WAY #211

WEEKI WACHEE SPRINGS, FL 34613 WEEKI WACHEE SPRINGS, FL 34613 US

Current Mailing Address: New Mailing Address:

6252 COMMERCIAL WAY #211 6252 COMMERCIAL WAY #211

WEEKI WACHEE SPRINGS, FL 34613 WEEKI WACHEE SPRINGS, FL 34613 US

FEI Number: 20-1228404 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BLAIR, SHEILA A 6252 COMMERCIAL WAY #211

WEEKI WACHEE SPRINGS, FL 34613 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:

Name:

Address:

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete BLAIR, KENNETH A TRUSTEE BLAIR, KENNETH A TRUSTEE Name: 3465 DELTONA BLVD. Address: 6252 COMMERCIAL WAY #211 SPRING HILL, FL 34606 City-St-Zip: WEEKI WACHEE, FL 34613 US

City-St-Zip: Title: MRS. () Delete Title: (X) Change () Addition ELLIS, RUBYE G TRUSTEE Name: Name: ELLIS, RUBYE G TRUSTEE

Address: 3465 DELTONA BLVD. Address: 6252 COMMERCIAL WAY #211 City-St-Zip: SPRING HILL, FL 34606 City-St-Zip: WEEKI WACHEE, FL 34613 US

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: RUBYE G. ELLIS MRS. 07/29/2007