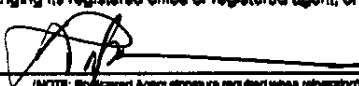
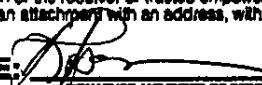


Apr. 30. 2008 1:48PM

No. 4206 P. 2

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # N04000007493		
1. Entity Name FAITH NEW TESTAMENT CHURCH OF GOD, INC.		
Principal Place of Business 808 SW 3RD STREET DELRAY BEACH, FL 33444		Mailing Address 808 SW 3RD STREET DELRAY BEACH, FL 33444
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent THOMPSON, J.V.M. 808 SW 3RD STREET DELRAY BEACH, FL 33444		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.		04/30/08 DATE
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		1000000942854 05/29/08-80037-020 70,00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P THOMPSON, JVM 808 SW 3RD STREET DELRAY BEACH, FL 33444	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V THOMPSON, LAUREL 808 SW 3RD STREET DELRAY BEACH, FL 33444	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WALLACE, NORMA 1501 WATERVIEW CIRCLE PALM SPRINGS, FL 33481	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CAMPBELL, AMY 3446 SPRING BLUFF PLACE LAUDERHILL, FL 33319	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 attachment with an address, with all other like empowered.		
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING OFFICER OR DIRECTOR		JOSEPH H THOMPSON 04/30/08 5615035869 Date Daytime Phone #