2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2009
Secretary of State

DOCUMENT# N04000009009

Entity Name: INTERFAITH COMMUNITY CHURCH INC.

Current Principal Place of Business:

1513 CENTRAL AVENUE
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

1513 CENTRAL AVENUE
KISSIMMEE, FL 34741

New Mailing Address:

3400 SUZETTE DRIVE
KISSIMMEE, FL 34746

FEI Number: 26-0091387 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KING, JEDDIE REV.
12 SOUTH FLAG COURT
KISSIMMEE, FL 34744 US

Name and Address of New Registered Agent:

KING, JEDDIE REV.
3400 SUZETTE DRIVE
KISSIMMEE, FL 34746 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: _____ 02/19/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: KING, ELMA
Address: 3400 SUZETTE DR
City-St-Zip: KISSIMMEE, FL 34746

Title: D ( ) Delete
Name: WAITE, JEANETTE
Address: 19 SOUTH FLAG COURT
City-St-Zip: KISSIMMEE, FL 34744

Title: D ( ) Delete
Name: MAEDA, MARTHA
Address: 7046 TALBOT DRIVE
City-St-Zip: ORLANDO, FL 32819

Title: P ( ) Delete
Name: KING, JEDDIE
Address: 3400 SUZETTE DR
City-St-Zip: KISSIMMEE, FL 34746

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
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: MARTHA MAEDA D 02/19/2009
Electronic Signature of Signing Officer or Director — Date