

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010514

FILED  
Apr 26, 2007  
Secretary of State

Entity Name: FAVOUR INTERNATIONAL MINISTRIES.INC

## Current Principal Place of Business:

239 ROSE TERRACE  
LAKE CITY, FL 32055

## New Principal Place of Business:

206 SW PILOT'S WAY  
LAKE CITY, FL 32024

## Current Mailing Address:

P O BOX 1856  
LAKE CITY, FL 32056 US

## New Mailing Address:

206 SW PILOT'S WAY  
LAKE CITY, FL 32024 US

FEI Number: 34-2025640

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MASHAVA, GEORGE  
206 SW PILOT'S WAY,  
LAKE CITY, FL 32024 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FAVOUR-EDWARDS, JENNIFER R  
Address: 239 ROSE TERRACE  
City-St-Zip: LAKE CITY, FL 32055 US

Title: VP ( ) Delete  
Name: MASHAVA, GEORGE  
Address: 206 SW PILOT'S WAY ,  
City-St-Zip: LAKE CITY, FL 32024 US

Title: SEC ( ) Delete  
Name: MASHAVA, MAUREEN  
Address: 206 SW PILOT'S WAY  
City-St-Zip: LAKE CITY, FL 32024 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FAVOUR-EDWARDS, JENNIFER R  
Address: 206 SW PILOT'S WAY  
City-St-Zip: LAKE CITY, FL 32024 US

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: JENNIFER FAVOUR-EDWARDS

PRES

04/26/2007

Electronic Signature of Signing Officer or Director

Date