2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2007
Secretary of State

DOCUMENT# N05000001335

Entity Name: FLORIDA ASSOCIATION OF HUNGER RELIEF MINISTRIES INC.

Current Principal Place of Business:

7820 CONGRESS STREET
NEW PORT RICHEY, FL 34653

New Principal Place of Business:

Current Mailing Address:

7820 CONGRESS STREET
NEW PORT RICHEY, FL 34653

New Mailing Address:

FEI Number: 86-1129847 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CYPHER, LESTER
7820 CONGRESS STREET
NEW PORT RICHEY, FL 34653 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: D ( ) Delete
Name: CYPHER, LESTER
Address: 7222 ORCHID LAKE RD.
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: T ( ) Delete
Name: KELM, GLEN
Address: 7820 CONGRESS STREET
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D ( ) Delete
Name: GRAY, DAVID
Address: US HIGHWAY 19
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: DS ( ) Delete
Name: HOFFMAN, KIM
Address: 7820 CONGRESS STREET
City-St-Zip: NEW PORT RICHEY, FL 34653

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: DS (X) Change ( ) Addition
Name: CRUZ, MEGUEL
Address: 7820 CONGRESS STREET
City-St-Zip: NEW PORT RICHEY, FL 34653

I hereby certify that the information supplied with this filing does not qualify for the 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: LESTER CYPHER CEO 01/04/2007

Electronic Signature of Signing Officer or Director — Date