2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002488

Apr 24, 2007 Secretary of State

Entity Name: FAITH, HOPE & CHARITY MINISTRIES INC

Current Principal Place of Business: New Principal Place of Business: 2831 SOMERSET DRIVE, APT B411 7102 NW 61ST STREET LAUDERDALE LAKES, FL 33311 TAMARAC, FL 33321 **Current Mailing Address: New Mailing Address:** P.O. BOX 491312 LAUDERDALE LAKES, FL 33349 FEI Number: 20-2795563 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MICHAEL J MCGOEY CPA INC 639 EAST OCEAN AVE SUITE 101 BOYNTON BEACH, FL 33435 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BRAITHWAITE, VEAMA G Name: Name: 2831 SOMERSET DRIVE, APT B411 Address: Address: City-St-Zip: LAUDERDALE LAKES, FL 33311 City-St-Zip: Title: () Delete Title: () Change () Addition FRANCIS, CHRISTINE Name: Name: Address: 2790 SOMERSET DRIVE, APT 218 Address: City-St-Zip: LAUDERDALE LAKES, FL 33311 City-St-Zip: Title: () Delete Title: () Change () Addition STIDHAM, JASHEEN Name: Name: 8320 SHERMAN CT APT 101 Address: Address: City-St-Zip: MIRIMAR, FL 33025 City-St-Zip: Title: F () Delete Title: () Change () Addition Name: EDWARDS, VERONICA Name: Address: 2831 SOMERSET DRIVE, APT B411 Address: City-St-Zip: LAUDERDALE LAKES, FL 33311 City-St-Zip: Title: () Delete Title: () Change () Addition EXCEL, MARK Name: Name: 58 FOOTHILL PLACE Address: Address: City-St-Zip: WHEATLEY HEIGHTS, NY 11798 City-St-Zip: Title: (X) Delete Title: () Change () Addition LUGO, VIRGINIA Name: Name: Address: 10530 SOUND AVE Address: MATTITUCK, NY 11952 City-St-Zip: 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: JASHEAN L. STIDHUM D 04/24/2007