

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003709

FILED
Apr 05, 2006
Secretary of State

Entity Name: EVERLASTING FAITH FELLOWSHIP, INC.

Current Principal Place of Business:

208 ROTONDA BLVD E
ROTONDA, FL 33974

New Principal Place of Business:

Current Mailing Address:

208 ROTONDA BLVD E
ROTONDA, FL 33974

New Mailing Address:

FEI Number: 74-3049039

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GERACE, JAMES E REV.
208 ROTONDA BLVD E
ROTONDA, FL 33947 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: GERACE, JAMES E REV.
Address: 208 ROTONDA BLVD E
City-St-Zip: ROTONDA, FL 33947

Title: VP () Delete
Name: GERACE, LINDA J
Address: 208 ROTONDA BLVD E
City-St-Zip: ROTONDA, FL 33947

Title: SEC () Delete
Name: BARKER, DORENE
Address: 4 BRIARCREEK DR
City-St-Zip: VOORHEES, NJ 08043

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:

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: JAMES E GERACE

P

04/05/2006

Electronic Signature of Signing Officer or Director

Date