2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N05000007391

Entity Name: FAITH IN ACTION MINISTRIES AND CHRISTIAN EDUCATION CENTER, INC.

Current Principal Place of Business:

18190 SW 102 AV
MIAMI, FL 33177

New Principal Place of Business:

18190 SW 102 AV
MIAMI, FL 33157

Current Mailing Address:

11960 SW 173 STREET
MIAMI, FL 33177

New Mailing Address:

FEI Number: 06-1775136 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FERGUSON, BETTIE M
11960 SW 173 STREET
MIAMI, FL 33177 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: FERGUSON, BETTIE M
Address: 11960 SW 173 STREET
City-St-Zip: MIAMI, FL 33177

Title: VP ( ) Delete
Name: FERGUSON, CHARLES
Address: 11960 SW 173 STREET
City-St-Zip: MIAMI, FL 33177

Title: S ( ) Delete
Name: NELSON, SONYA
Address: 12340 SW 212 ST
City-St-Zip: MIAMI, FL 33177

Title: T ( ) Delete
Name: PARKER, WILLIAM
Address: 10430 SW 200 ST
City-St-Zip: MIAMI, FL 33157

Title: MC ( ) Delete
Name: HICKSON, MARTHA
Address: 10285 SW 176 ST.
City-St-Zip: MIAMI, FL 33157

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:

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: BETTIE M. FERGUSON DR. 04/30/2009
Electronic Signature of Signing Officer or Director — Date