2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2007
Secretary of State

DOCUMENT# N05000010369

Entity Name: FAITH REVIVAL CHURCH, INC.

Current Principal Place of Business:

9150 - 49 ST N
PINELLAS PARK, FL 33782 US

New Principal Place of Business:

9150 - 49 ST N
SUITE D
PINELLAS PARK, FL 33782 US

Current Mailing Address:

10552 VALENCIA ROAD
SEMINOLE, FL 33772 US

New Mailing Address:

FEI Number: 20-3594642 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FRY, WANDA C
10552 VALENCIA ROAD
SEMINOLE, FL 33772 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: ADMN ( ) Delete
Name: MARTIN, ROBERT N
Address: 523 PLAZA SEVILLE COURT, #48
City-St-Zip: TREASURE ISLAND, FL 33706

Title: S ( ) Delete
Name: FRY, WANDA C
Address: 10552 VALENCIA ROAD
City-St-Zip: SEMINOLE, FL 33772

Title: T ( ) Delete
Name: NELSON, CINDY L
Address: 8232 - 45TH STREET NORTH
City-St-Zip: PINELLAS PARK, FL 33781

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: TRES (X) Change ( ) Addition
Name: FRY, WANDA C
Address: 10552 VALENCIA ROAD
City-St-Zip: SEMINOLE, FL 33772

Title: SEC (X) Change ( ) Addition
Name: NELSON, CINDY L
Address: 8232 - 45TH STREET NORTH
City-St-Zip: PINELLAS PARK, FL 33781

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: WANDA C FRY TRES 03/23/2007
Electronic Signature of Signing Officer or Director Date