

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000771

FILED
Jul 06, 2007
Secretary of State

Entity Name: FAITH LITERACY COMMUNITY RESOURCE CENTER, INC.

Current Principal Place of Business:

PO BOX 618354
ORLANDO, FL 32861

New Principal Place of Business:

2424 PRAIRIE VIEW DRIVE
WINTER GARDEN, FL 34787

Current Mailing Address:

PO BOX 618354
ORLANDO, FL 32861

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DAWSON, TAMMY L
2424 PRAIRIE VIEW DRIVE
WINTER GARDEN, FL 34787 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:

Title: P () Delete
Name: DAWSON, JOHNNY D
Address: PO BOX 618354
City-St-Zip: ORLANDO, FL 32861

Title: VP () Delete
Name: DAWSON, TAMMY L
Address: PO BOX 618354
City-St-Zip: ORLANDO, FL 32861

Title: SECR () Delete
Name: CONEY, SHERYL L
Address: 7317 HIGH LAKE DR.
City-St-Zip: ORLANDO, FL 32818

Title: A TR () Delete
Name: CONEY, LARRY
Address: 7317 HIGH LAKE DR
City-St-Zip: ORLANDO, FL 32818

Title: TREA () Delete
Name: DEERING, ELAINE
Address: 991 SHETLAND AVE
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DAWSON, JOHNNY D
Address: P O BOX 618354
City-St-Zip: ORLANDO, FL 32861

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: JOHNNY DAWSON

P

07/06/2007

Electronic Signature of Signing Officer or Director

Date