

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000107

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: FLANKER'S FAITH CHARITY INC

**Current Principal Place of Business:**

2201 SW 68TH AVE.  
MIRAMAR, FL 33023

**New Principal Place of Business:**

**Current Mailing Address:**

2201 SW 68TH AVE.  
MIRAMAR, FL 33023

**New Mailing Address:**

FEI Number: 20-8159905

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD  
SUITE A-100  
TAMPA, FL 336123425 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: DP ( ) Delete  
Name: JONES, OSWALD  
Address: 2201 SW 68TH AVE.  
City-St-Zip: MIRAMAR, FL 33023

Title: DS ( ) Delete  
Name: GRAHAM, GLEN  
Address: 14415 GARDEN DR.  
City-St-Zip: N. MIAMI, FL 33166

Title: DT ( ) Delete  
Name: SAVAGE, EVERTON  
Address: #193, HILLSBOROUGH TER. CORAL GARDEN, WHIT  
City-St-Zip: E SANDS, MONTEGO BAY JAMAICA,

**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 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: OSWALD JONES

DP

04/27/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date