

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001398

FILED
Mar 05, 2008
Secretary of State

Entity Name: FAITH FOUNDATIONS INTERNATIONAL, INC.

Current Principal Place of Business:

1108 NE 9TH ST.
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

1108 NE 9TH ST.
OCALA, FL 34470

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELSON, RAY B
1108 NE 9TH ST.
OCALA, FL 34470 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: D () Delete
Name: NELSON, RAY B
Address: 1108 NE 9TH ST.
City-St-Zip: OCALA, FL 34470

Title: D () Delete
Name: GREEN, HOWARD A
Address: 44 ALMOND TRAIL
City-St-Zip: OCALA, FL 34472

Title: D () Delete
Name: BAXLEY, K. MICHAEL
Address: 3218 SW 34TH AVE.CIR.
City-St-Zip: OCALA, FL 34474

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: RAY B NELSON

PRES

03/05/2008

Electronic Signature of Signing Officer or Director

Date