2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008009

Entity Name: FAMILY OF FAITH CHRISTIAN CHURCH INC.

FILED Apr 25, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

101 S. WYMORE RD 6151 CLARCONNA OCOEE RD 0RLANDO, FL 32810 US

ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address: New Mailing Address:

PO BOX 160036 PO BOX 680726

ALTAMONTE SPRINGS, FL 32716 US ORLANDO, FL 32868 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

MATOS, HERMAN
2020 CORNER GLEN DRIVE
ORLANDO, FL 32820 US
PABON, GIOVANNI
912 N JACK LAKE RD
CLERMONT, FL 34711 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: GIOVANNI PABON 04/25/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: P (X) Change () Addition

 Name:
 MATOS, HERMAN
 Name:
 PABON, GIOVANNI

 Address:
 2020 CORNER GLEN DRIVE
 Address:
 912 N JACK LAKE RD

 City-St-Zip:
 ORLANDO, FL 32820 US
 City-St-Zip:
 CLERMONT, FL 34711 US

Title: VP () Delete Title: S (X) Change () Addition Name: SANTIAGO, ISABELO Name: FOSTER, HEIDY

 Name:
 SANTIAGO, ISABELO
 Name:
 FOSTER, HEIDY

 Address:
 2924 BLAKLEY DRIVE
 Address:
 9732 LAKE DISTRIC LN

 City-St-Zip:
 ORLANDO, FL 32835 US
 City-St-Zip:
 ORLANDO, FL 32832 US

Title: T () Delete Title: T (X) Change () Addition

 Name:
 PABON, GIOVANNI
 Name:
 ALVELO, JOEL

 Address:
 6423 SEABURY WAY
 Address:
 13001 LILY POND CT

 City-St-Zip:
 ORLANDO, FL 32818
 City-St-Zip:
 ORLANDO, FL 32824

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: GIOVANNI PABON P 04/25/2008