2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006408

Address: City-St-Zip:

tite Name: FAITH CHARITY FUGLITORIS

FILED Apr 30, 2009 Secretary of State

Entity Name: FAITH CHARITY FLIGHTS USA, INC.						
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
150 153RE 203 ST PETER	O AVE RSBURG, FL	33708				
Current Mailing Address:			New Mailing Address:			
150 153RE 203 ST PETER	O AVE RSBURG, FL	33708				
FEI Number:	: 26-3070330	FEI Number Applied For ()	FEI Number Not Appl	icable () Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:		
	O AVE RSBURG, FL					
	named entity e of Florida.	submits this statement for the p	urpose of changing i	ts registered office or registered agent, or both,		
SIGNATUR	RE:					
	Electro	nic Signature of Registered Age	nt	Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	O'NEAL, ROC 150 153RD AV		Title: Name: Address: City-St-Zip:	PDT (X) Change () Addition O'NEAL, ROCK 150 153RD AVE ST PETERSBURG, FL 33708		
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	SD () Change (X) Addition AMANDA, BATTISTONI C/O 150 153RD AVE #203 ST PETERSBURG, FL 33708		
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition DANIEL, CRESPO C/O 150 153RD AVE #203 ST PETERSBURG, FL 33708		
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition TIMOTHY, EHRLICH C/O 150 153RD AVE #203 ST PETERSBURG, FL 33708		
Title: Name:	() Delete	Title: Name:	D () Change (X) Addition RICHARD, HULL		

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.

Address:

City-St-Zip:

C/O 150 153RD AVE #203

ST PETERSBURG, FL 33708

SIGNATURE: ROCK ONEAL D 04/30/2009