

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000011744

FILED
Apr 30, 2012
Secretary of State

Entity Name: THE FATHER'S HEART CHRISTIAN CENTER, INC.

Current Principal Place of Business:

9622 W. MCNAB RD
TAMARAC, FL 33321

New Principal Place of Business:

Current Mailing Address:

9622 W. MCNAB RD
TAMARAC, FL 33321

New Mailing Address:

FEI Number: 45-3606265

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

O'BRIEN, CLIVE A
9622 W. MCNAB RD
TAMARAC, FL 33321 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: P
Name: O'BRIEN, CLIVE A
Address: 9622 W. MCNAB RD
City-St-Zip: TAMARAC, FL 33321

Title: VP
Name: O'BRIEN, SHEILA D
Address: 9622 W. MCNAB RD
City-St-Zip: TAMARAC, FL 33321

Title: OFC
Name: WARREN, WOODARD I
Address: 1730 S. SR 7 #203
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: SEC
Name: WALTERS, LEONTYNE C
Address: 1230 HAMPTON BLVD
City-St-Zip: MARGATE, FL 33068

Title: OFC
Name: HARVEY, DEVONRY
Address: 590 PRINCESS DR
City-St-Zip: MARGATE, FL 33068

Title: OFC
Name: HARVEY, BEVERLEY
Address: 590 PRINCESS DR
City-St-Zip: MARGATE, FL 33068

I hereby 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 all other like empowered.

SIGNATURE: CLIVE ANTHONY O'BRIEN

PR

04/30/2012

Electronic Signature of Signing Officer or Director

Date