2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12904

FILED Aug 12, 2009 Secretary of State

Entity Name: NEW COVENANT FAITH FELLOWSHIP CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 4514 CONLEY STREET ORLANDO, FL 32811 US **Current Mailing Address: New Mailing Address:** C/O SHERMAN ADAMS 2808 MESSINA AVE. ORLANDO, FL 32811 US FEI Number: 59-2651373 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ADAMS, SHERMAN 2808 MESSINA AVE ORLANDO, FL 32811 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: PTMD () Delete () Change () Addition ADAMS, SHERMAN Name: Name: 2808 MESSINA AVE. Address: Address: City-St-Zip: ORLANDO, FL 32811 City-St-Zip: Title: VD () Delete Title: VD (X) Change () Addition ADAMS, LILLAN Name: ADAMS, NELLIE Name: Address: 2808 MESSINA AVENUE Address: 2808 MESSINA AVENUE City-St-Zip: ORLANDO, FL 32811 City-St-Zip: ORLANDO, FL 32811 Title: () Delete Title: (X) Change () Addition BIZZELL, JACQUELINE D CLARK, BRENDA Name: Name: 1333 KOZART STREET 1430 DIGARMO TERRACE Address: Address: City-St-Zip: ORLANDO, FL 32811 City-St-Zip: DELTONA, FL 32725 Title: () Delete Title: (X) Change () Addition Name: LUTHER LEE HENDERSON Name: PEARL ELLIS 4245 PAPPY KENNEDY STREET Address: 702 QUILL AVE #1 Address: City-St-Zip: ORLANDO, FL 32805 City-St-Zip: ORLANDO, FL 32811 Title: VSD () Delete Title: (X) Change () Addition **NELLIE GRACE ADAMS** JENNIFER LEWIS Name: Name: 2808 MESSINA AVE 2672 BRANDON CIRCLE Address: Address: City-St-Zip: ORLANDO, FL 32811 City-St-Zip: APOPKA, FL 32703

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: SHERMAN ADAMS PTMD 08/12/2009