2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20880

FILED Apr 29, 2008 Secretary of State

Entity Name: FAITH CHAPEL PENTECOSTAL CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 108 HENDERSON ROAD TALLAHASSEE, FL 32312 **Current Mailing Address: New Mailing Address:** 108 HENDERSON ROAD TALLAHASSEE, FL 32312 FEI Number: 59-2870471 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FRANKLIN, LENARD 5660 OLD HICKORY LANE TALLAHASSEE, FL 32303 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: () Delete (X) Change () Addition FRANKLIN, LENARD, FRANKLIN, LENARD, Name: Name: 5660 OLD HICKORY LANE Address: 5660 OLD HICKORY LANE Address: City-St-Zip: TALLAHASSEE, FL City-St-Zip: TALLAHASSEE, FL 32303 Title: Title: () Delete () Change () Addition WILLIAMS, MARY D Name: Name: Address: 720 FULTON ROAD Address: City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: Title: () Delete Title: (X) Change () Addition DAVIS, RUBY CASWELL, Name: DAVIS, RUBY CASWELL, Name: 3028 GRADY RD. 3028 GRADY RD. Address: Address: City-St-Zip: TALLAHASSEE, FL City-St-Zip: TALLAHASSEE, FL 32312 Title: Title: (X) Change () Addition () Delete Name: WILLIAMS, MAEBELLE Name: WILLIAMS, MAEBELLE Address: 1021 SYKES DRIVE Address: 1021 SYKES DRIVE City-St-Zip: TALLAHASSEE, FL City-St-Zip: TALLAHASSEE, FL 32304 Title: () Delete Title: (X) Change () Addition ROUISE, ALBERTHA L ROUISE, ALBERTHA L Name: Name: 227 BERMUDA ROAD 227 BERMUDA ROAD Address: Address: City-St-Zip: TALLAHASSEE, FL City-St-Zip: TALLAHASSEE, FL 32312 Title: () Delete Title: () Change () Addition YOUNG, JONATHAN Name: Name: Address: 2881 BALTIC AVENUE Address: TALLAHASSEE, FL 32312 City-St-Zip: 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: LENARD FRANKLIN PD 04/29/2008