

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21719

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: FAITH ASSEMBLY MINISTRIES, INC.

**Current Principal Place of Business:**

3300 INVERARRY BLVD  
#100  
LAUDERHILL, FL 33319 US

**New Principal Place of Business:**

**Current Mailing Address:**

4461 NW 23 CT  
LAUDERHILL, FL 33313 US

**New Mailing Address:**

FEI Number: 65-0571450      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BRISSETT, ETHELBERT NORMAN  
4461 NW 23RD CT  
LAUDERHILL, FL 33313 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: PD ( ) Delete  
Name: BRISSETT, ETHELBERT N.  
Address: 4461 NW 23RD COURT  
City-St-Zip: LAUDERHILL, FL

Title: STD ( ) Delete  
Name: BRISSETT, VALRENE LINDA  
Address: 4461 NW 23RD COURT  
City-St-Zip: LAUDERHILL, FL

Title: D ( ) Delete  
Name: DEER, WINSOME  
Address: 4800 NW 73RD AVE  
City-St-Zip: LAUDERHILL, FL 33319

Title: D ( ) Delete  
Name: GRAY, PEARLINE Y  
Address: 7410 NW 51 ST.  
City-St-Zip: LAUDERHILL, FL 33319

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: VALRENE L. BRISSETT

STD

04/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date