

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 26, 2005 8:00 am
Secretary of State

01-26-2005 90041 002 *****8.75
01-26-2005 90041 001 *****61.25

DOCUMENT # N26987

1. Entity Name

FAITH CHURCH OF FORT LAUDERDALE, INC.



Principal Place of Business

6539 W. COMMERCIAL BLVD
TAMARAC FL 33319

Mailing Address

11948 N.W. 11 COURT
CORAL SPRINGS FL 33071

00000433



1st MOORE CR2E037 (10/04)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0055962

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALESSI, PAUL JR.
11948 NW 11 CT
CORAL SPRINGS FL 33071

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

PAUL ALESSI JR. *Paul Alessi Jr.* *Jan 20, 2005*
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME ALESSI, PAUL JR.
STREET ADDRESS 11948 NW 11 CT
CITY-ST-ZIP CORAL SPRINGS FL 33071

TITLE VD ☐ Delete
NAME ALESSI, JOHN
STREET ADDRESS 10304 SW 87 COURT
CITY-ST-ZIP MIAMI, FL 33156

TITLE SD ☐ Delete
NAME ALESSI, MARK P.
STREET ADDRESS 7269 NW 9CT
CITY-ST-ZIP FORT LAUDERDALE FL 33324

TITLE TD ☐ Delete
NAME FERKOVICH, MADELINE A.
STREET ADDRESS 7919 NW 35TH PL
CITY-ST-ZIP GAINESVILLE FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Paul Alessi Jr. *PAUL ALESSI, JR.* *1/20/05* *954-346-8700*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone