


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 23, 2007 08:00 AM
Secretary of State

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
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/06)	
4. FEI Number 65-0055962	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent ALESSI, PAUL JR. 11948 NW 11 CT CORAL SPRINGS FL 33071	
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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.

FAITH CHURCH
Rev. Paul Alessi, Jr.

SIGNATURE: *Paul Alessi Jr.* (NOTE: Registered Agent signature required when reinstating)

DATE: *Jan 19, 2007*

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALESSI, PAUL JR.		NAME		
STREET ADDRESS	11948 NW 11 CT		STREET ADDRESS		
CITY-STATE-ZIP	CORAL SPRINGS FL 33071		CITY-STATE-ZIP		
TITLE	VD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALESSI, JOHN		NAME		
STREET ADDRESS	10304 SW 87 COURT		STREET ADDRESS		
CITY-STATE-ZIP	MIAMI, FL 33156		CITY-STATE-ZIP		
TITLE	SD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALESSI, MARK P.		NAME		
STREET ADDRESS	9269 NORTHWEST 9 COURT		STREET ADDRESS		
CITY-STATE-ZIP	FORT LAUDERDALE FL 33324		CITY-STATE-ZIP		
TITLE	TD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERKOVICH, MADELINE A.		NAME		
STREET ADDRESS	7919 NW 35TH PL		STREET ADDRESS		
CITY-STATE-ZIP	GAINESVILLE FL 32606		CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-STATE-ZIP			CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-STATE-ZIP			CITY-STATE-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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. President/Pastor* **Jan 19, 2007** **954 346-8700**