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Secretary of State

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N29422

1. Corporation Name

CATHEDRAL OF FAITH CHURCH, INC.

Principal Place of Business

6304 N. 30TH ST.
TAMPA FL 33610-1419

Mailing Address

6304 N. 30TH ST.
TAMPA FL 33610-1419



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip Country

24

25

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip Country

29

30

3. Date Incorporated or Qualified

11/23/1988

4. FEI Number

59-2936982

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

HUGGINS, THOMAS
6304 N 30TH ST
TAMPA FL 33610

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME PRICE, RONNIE
STREET ADDRESS 4802 RIVER GRASS CT.
CITY-ST-ZIP TAMPA FL

TITLE D ☐ DELETE
NAME AMMONS, HENRY
STREET ADDRESS 3009 ELLIOTT ST
CITY-ST-ZIP TAMPA FL

TITLE DT ☐ DELETE
NAME LANGSTON, CHARLES
STREET ADDRESS 8433 MONTEREY CT #5
CITY-ST-ZIP TAMPA FL

TITLE D ☐ DELETE
NAME HOWELL, JAMES H PASTOR
STREET ADDRESS 6302 N 30TH ST
CITY-ST-ZIP TAMPA FL

TITLE D ☐ DELETE
NAME HUGGINS, THOMAS III
STREET ADDRESS 4516 TARPON DRIVE
CITY-ST-ZIP TAMPA FL

TITLE T ☐ DELETE
NAME WALTERS, FLOYD A JR
STREET ADDRESS 13015 FIRTH CT, APT. E1
CITY-ST-ZIP TAMPA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE PRESIDENT ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

3-25-99

Date

Daytime Phone #