

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31167

FILED
Feb 28, 2011
Secretary of State

Entity Name: ALL FAITHS FOOD BANK, INC.

Current Principal Place of Business:

8171 BLAIKIE CT
SARASOTA, FL 34240 US

New Principal Place of Business:

Current Mailing Address:

8171 BLAIKIE CT
SARASOTA, FL 34240 US

New Mailing Address:

FEI Number: 65-0115814 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DUNN, DAN
8171 BLAIKIE CT
SARASOTA, FL 34240 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
Name: LOPEZ, JOHN
Address: 8171 BLAIKIE CT.
City-St-Zip: SARASOTA, FL 34240

Title: VD
Name: SMITH, MARK
Address: 8171 BLAIKIE CT
City-St-Zip: SARASOTA, FL 34240

Title: VD
Name: CARNEY, PAULA
Address: 8171 BLAILIE CT.
City-St-Zip: SARASOTA, FL 34240

Title: D
Name: GIRARD, BEVERLY
Address: 8171 BLAIKIE CT
City-St-Zip: OSPREY, FL 34240

Title: D
Name: WISNER, BRUCE
Address: 8171 BLAIKIE CT
City-St-Zip: SARASOTA, FL 34240

Title: D
Name: CORBRIDGE, KELLEY
Address: 8171 BLAIKIE CT.
City-St-Zip: SARASOTA, FL 34240

I hereby 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 all other like empowered.

SIGNATURE: DAN DUNN

ED

02/28/2011

Electronic Signature of Signing Officer or Director

Date