2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31167

FILED Feb 13, 2012 Secretary of State

Entity Name: ALL FAITHS FOOD BANK, INC.

Current Principal Place of Business: New Principal Place of Business:

8171 BLAIKIE CT

SARASOTA, FL 34240 US

Current Mailing Address: New Mailing Address:

8171 BLAIKIE CT

SARASOTA, FL 34240 US

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

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

DUNN, DAN DOUBLE, NICOLE 8171 BLAIKIE CT 8171 BLAIKIE CT

SARASOTA, FL 34240 US SARASOTA, FL 34240 US

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: NICOLE DOUBLE 02/13/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

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

Title: VD

Name: NICOLAS, JOHN
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:

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

Title:

Name: WILSON, BILL
Address: 8171 BLAIKIE CT
City-St-Zip: SARASOTA, FL 34240

Title: [

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: NICOLE DOUBLE ED 02/13/2012