2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

SECRETARY OF STATE DIVISION OF COMPRENATIONS **DOCUMENT # N31475** OUR FATHER'S HOUSE SOUP KITCHEN, INC. 06 AUG 28 PM 1: 26 Principal Place of Business Mailing Address P.O. BOX 71 2380 M. L. KING BLVD. POMPANO BEACH, FL 33061 POMPANO BEACH, FL 33061-0071 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 08242006 Chg-NP CR2E037 (4/06) 4. FEI Number 65-0150748 Applied For City & State City & State Not Applicable Žip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROTONN COLTON (FAZZOLARI), JAMIE 2380 MARTIN LUTHER KING BLVD Street Address (P.D. Box Number is Not Acceptable) BOX 71 P.O. BOX 71 POMPANO BEACH, FL 33061 POMPANO Beach ఎ రొక్ 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. KOTOKNO 9. Election Campaign Financing Make check payable to \$5.00 May Be Amended AR is \$61.25 Trust/Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Delete TIME TITLE Addition COLTON (FAZZOLARI), JAMIE Phylis ROTONNO NAME MAME 8804 WARICK DRIVE STREET ADDRESS 3036 NE 17TH AVE STREET ADDRESS POMPANO BEACH, FL 33068 CITY-ST-ZIP OCA RATON FL 33433 CITY-ST-ZIP (ZZ betete TITLE TITLE ☐ Addition FORD, FRED NAME NAME 100079281451 STREET ADDRESS 1791 NW 107 DR STREET ADORESS 08/30/06--01052--009 CITY-ST-ZIP CORAL SPRINGS, FL 33071 ******81.25 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition CRISSY, KATIE NAME STREET ADDRESS 7551 NW 43 STREET STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS, FL 33065 CITY-ST-7IP TITLE 122 Delete TITLE ☐ Change ■ Addition COLTON (FAZZOLARI), MARIA NAME NAME STREET ADDRESS 3036 NE 17TH AVE STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33064 CITY-ST-ZIP TITLE Detete Tmyrna Sands 30 40 Holiday Springs Blud MAGRIE, FL. 33063 TITLE ☐ Change Addition NAME INGALLS, BRIAN NAME STREET ADDRESS 3100 NE 47 CT, TWNHSE 4 STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33308 CITY-\$1-709 TITLE Delete MLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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. HILLS ROTONNO -SIGNATURE: