

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32509

FILED  
Jul 01, 2008  
Secretary of State

**Entity Name:** GOD'S CHURCH OF FAITH INC.

**Current Principal Place of Business:**

538 HAVERHILL RD S  
WEST PALM BEACH, FL 33415

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 15138  
WEST PALM BEACH, FL 33416

**New Mailing Address:**

**FEI Number:** 65-0120241      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

PEREZ, RAFAEL  
857 IVORY LANE  
WEST PALM BEACH, FL 33415      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: PEREZ, RAFAEL  
Address: 857 IVORY LANE  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: O      ( ) Delete  
Name: PEREZ, NORMA  
Address: 857 IVORY LANE  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: O      ( ) Delete  
Name: ANDRES, ROMAN  
Address: 538 HAVERHILL RD S.  
City-St-Zip: WEST PALM BEACH, FL 33415

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: RAFAEL PEREZ

D

07/01/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date