

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35522

FILED
Jun 07, 2006
Secretary of State

Entity Name: REHOBOTH FAITH CATHEDRAL, INC.

Current Principal Place of Business:

% KNOVACK G. JONES
155 SOUTH MIAMI AVE PH 1
MIAMI FL, FL 33130 US

New Principal Place of Business:

806 EAST 131ST AVENUE
TAMPA, FL 33612 US

Current Mailing Address:

P.O. BOX 11907
TAMPA, FL 33680 US

New Mailing Address:

FEI Number: 59-2991405 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

JONES, KNOVACK G ATTY
290 N. W. 165TH STREET
SUITE P250
MIAMI, FL 33169 US

Name and Address of New Registered Agent:

STEVENSON, MYRTIS REV.
754 29TH AVENUE SOUTH
ST. PETERSBURG, FL 33705 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: MYRTIS STEVENSON

06/07/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PDC () Delete
Name: BOLDEN, WILLIE REV.
Address: 5112 PACKARD STREET
City-St-Zip: LOS ANGELES, CA 90019 US

Title: VD () Delete
Name: BOLDEN, GLENDA R REV.
Address: 5112 PACKARD STREET
City-St-Zip: LOS ANGELES, CA 90019 US

Title: SD () Delete
Name: STEVENSON, EUGENE REV.
Address: 754 29TH AVENUE SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33705 US

Title: T () Delete
Name: STEPHENSON III, OLIVER ELDER
Address: 9805 MORRIS GLEN WAY
City-St-Zip: TAMPA, FL 33637

Title: T () Delete
Name: LUNDY, DARLENE C ELDER
Address: 8151 TOM SAWYER DRIVE
City-St-Zip: TAMPA, FL 33637 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDC (X) Change () Addition
Name: BOLDEN, WILLIE REV.
Address: 31513 CANYON VIEW DRIVE
City-St-Zip: LAKE ELSINORE, CA 92532 US

Title: VD (X) Change () Addition
Name: BOLDEN, GLENDA R REV.
Address: 31513 CANYON VIEW DRIVE
City-St-Zip: LAKE ELSINORE, CA 92532 US

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 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: WILLIE BOLDEN

REV.

06/07/2006

Electronic Signature of Signing Officer or Director

Date