


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 18, 2007 08:00 A
Secretary of State

DOCUMENT # N37591 1. Entity Name THE CHURCH ON THE WAY BY FAITH, INC.	
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Principal Place of Business 98 N COTTAGE HILL RD ORLANDO, FL 32805	Mailing Address PO BOX 555810 ORLANDO, FL 32855-5810
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03242007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SCOTT, DIANE
313 RONNIE CIR.
ORLANDO, FL 32811**

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reconstituting) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GLOVER, MAELIZA 1848 WILLIAMS MANOR AVE. ORLANDO, FL 32811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GLOVER, CLEVELAND 1856 WILLIAMS MANOR AVE ORLANDO, FL 32811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEE ALLS, ARTHUR 4747 ZARITA ST. ORLANDO, FL 32811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SMITH, DAISY 1856 WILLIAMS MANOR AVE ORLANDO, FL 32811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SCOTT, DIANE 313 RONNIE CIR. ORLANDO, FL 32811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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04/27/07-80067-024 61.25

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.

SIGNATURE: Maeliza Glover 4/16/07 (407)295-1211
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #