

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38654

FILED  
Apr 26, 2006  
Secretary of State

**Entity Name:** FORT ALAFIA RESTORATION MINISTRIES, INC.

**Current Principal Place of Business:**

410 SWILLEY RD  
HWY. 39 AND SWILLEY  
PLANT CITY, FL 33567

**New Principal Place of Business:**

**Current Mailing Address:**

410 SWILLEY RD  
HWY. 39 AND SWILLEY  
PLANT CITY, FL 33567

**New Mailing Address:**

**FEI Number:** 59-2436023

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DIXON, RONALD C  
3425 PORTER RD.  
LITHIA, FL 33547 US

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

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: DP ( ) Delete  
Name: DIXON, REV RONALD C.  
Address: 3425 PORTER RD.  
City-St-Zip: LITHIA, FL

Title: DT ( ) Delete  
Name: EDGE, DUANE  
Address: 3119 KAYSVILLE RD.  
City-St-Zip: LITHIA, FL 33547

Title: DS ( ) Delete  
Name: MARR, TOM  
Address: 2683 KEYSVILLE DRIVE  
City-St-Zip: LITHIA, FL 33547

Title: DT ( ) Delete  
Name: DURHAM, JEFF  
Address: 4815 SOUTHWIND COURT  
City-St-Zip: MULBERRY, FL 33860

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

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

Title: DT (X) Change ( ) Addition  
Name: EDGE, DUANE  
Address: 3119 KEYSVILLE RD.  
City-St-Zip: LITHIA, FL 33547

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: RONALD C DIXON

DP

04/26/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date