2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38735

FILED Jan 13, 2009 Secretary of State

Entity Name: INTERFAITH FOOD PANTRY, INC. **Current Principal Place of Business: New Principal Place of Business:** 9530 STARKEY ROAD SEMINOLE, FL 33777 US **Current Mailing Address: New Mailing Address:** P O BOX 7071 SEMINOLE, FL 33775 US FEI Number: 59-3028662 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TAYLOR, ROBERT W JOHNSON, HOWARD H 4750 COVE CIRCLE N. 11452 129TH AVE #502 LARGO, FL 33778 US SAINT PETERSBURG, FL 33708 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: HOWARD H. JOHNSON 01/13/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition FLANIGAN, EDWARD B Name: Name: 9757 37TH ST N Address: Address: City-St-Zip: PINELLAS PARK, FL 34666 City-St-Zip: Title: () Delete Title: **TRES** (X) Change () Addition Name: TAYLOR, ROBERT W Name: JOHNSON, HOWARD H Address: 4750 COVE CIRCLE, N., UNIT #502 Address: 11452 129TH AVE City-St-Zip: SAINT PETERSBURG, FL 33708 City-St-Zip: LARGO, FL 33778 Title: CS () Delete Title: () Change () Addition BAUR, ELAINE Name: Name: 10215 REGAL DRIVE, APT. #36 Address: Address: City-St-Zip: LARGO, FL 33774 City-St-Zip: () Delete Title: Title: () Change () Addition Name: STEVENSON, STUART Name: Address: 11020 126TH TER Address: City-St-Zip: LARGO, FL 33778 City-St-Zip: Title: () Delete Title: () Change () Addition BICKEL, PAT Name: Name: 11200 102 N AVE 61 Address: Address: SEMINOLE, FL 33778 City-St-Zip: 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: HOWARD H. JOHNSON TRES 01/13/2009