## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N42909

FILED Jan 04, 2005 Secretary of State

Entity Name: FAITH COMMUNITY FELLOWSHIP, INC.

**Current Principal Place of Business: New Principal Place of Business:** FAITH COMMUNITY FELLOWSHIP 3264 TOWNSEND BLVD JACKSONVILLE, FL 322772751 US **New Mailing Address: Current Mailing Address:** FAITH COMMUNITY FELLOWSHIP 3264 TOWNSEND BLVD JACKSONVILLE, FL 322772751 US FEI Number: 59-3054501 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: CROOK, PERCY 10961 CHALLEUX SOUTH JACKSONVILLE, FL 32225 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DVP (X) Change ( ) Addition () Delete CROOK, PERCY DILLINGHAM, DENNIS A Name: Name: 10961 CHALLEUX S. Address: 4512 HARTMAN RD Address: City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: JACKSONVILLE, FL 32225 Title: () Delete Title: () Change () Addition PIERCE, JAMES Name: Name: Address: 2752 SAFESHELTER DR WEST Address: City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: Title: (X) Delete Title: () Change () Addition JONES, ROY Name: Name: 7170 SAN SOUCI Address: Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: Title: () Delete Title: () Change () Addition LEWIS, HERBERT Name: Name: 939 MILLARD COURT WEST Address: Address: City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: Title: () Delete Title: () Change () Addition VAN STADEN, DEON Name: Name: 3317 VOLLEY DRIVE Address: Address: City-St-Zip: JACKSONVILLE, FL 32277 City-St-Zip: Title: (X) Delete Title: () Change () Addition STENER, ANDREW Name: Name: Address: 2245 EAGLES NEST RD Address: JACKSONVILLE, FL 32246 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DEON VANSTADEN PAST 01/04/2005