2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50295

Apr 01, 2009 Secretary of State

Entity Name: FAITH IN ACTION DELIVERANCE MINISTRIES & EDUCATION, CENTER, INC.

Current Principal Place of Business: New Principal Place of Business:

18190 S.W. 102ND AVENUE MIAMI, FL 33157

Current Mailing Address: New Mailing Address:

18190 S.W. 102ND AVENUE MIAMI, FL 33157

FEI Number: 65-0345340 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:

FERGUSON, BETTIE 11960 SOUTHWEST 173RD STREET MIAMI, FL 33177 US

OFFICERS AND DIRECTORS:

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

() Delete

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete FERGUSON, CHARLES FERGUSON, BETTIE Name: Name: 11960 SW 173 STREET Address: 11960 SW 173 STREET Address:

City-St-Zip: MIAMI, FL 33177 City-St-Zip: MIAMI, FL 33177 Title: Title: (X) Change () Addition

PARKER, WILLIAM, SR. Name: FERGUSON, CHARLES Name: Address: 10430 SW 200 STREET Address: 11960 SW 173 ST City-St-Zip: MIAMI, FL 33157 City-St-Zip: MIAMI, FL 33177

Title: () Delete Title: (X) Change () Addition FERGUSON, BETTIE M NELSON, SONYA L Name: Name:

11960 S.W. 173 ST. 12340 SW 212 ST Address: Address: City-St-Zip: MIAMI, FL 33177 City-St-Zip: MIAMI, FL 33177

Title: () Delete Title: CEO (X) Change () Addition

Name: NELSON, SONYA Name: HARRIS, SHARON Address: 12340 SW 212 ST. Address: 1261 SE 27 ST City-St-Zip: MIAMI, FL 33177 City-St-Zip: HOMESTEAD, FL 33035

Title: () Delete Title: () Change (X) Addition

HICKSON, MARTHA Name: Name: 10285 SW 176 ST Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33157

Title: () Delete Title: () Change (X) Addition

THOMAS, SHIRLEY Name: Name: 10745 SW 107 CT Address: Address: MIAMI, FL 33157 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: BETTIE M. FERGUSON CEO 04/01/2009