

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90416 038 ****61.25

DOCUMENT # N50379

1. Entity Name

FAITH FELLOWSHIP CHURCH OF SANFORD, INC.



Principal Place of Business

1607 S SANFORD AVENUE
SANFORD FL 32771

Mailing Address

1607 S SANFORD AVENUE
SANFORD FL 32771

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number
59-2399111

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KELLER, ARLENE
1607 S. SANFORD AVE
SANFORD FL 32771

Name **Litzenberg, Lester**

Street Address (P.O. Box Number is Not Acceptable)

405 Orange Avenue

City

Sanford

FL

Zip Code

32771

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

X Lester Litzenberg

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE **V** ☒ Delete
NAME **JOHNSON, BOBBY**
STREET ADDRESS **848 UPSALA RD**
CITY-ST-ZIP **SANFORD FL 32771**

TITLE **V** ☒ Delete
NAME **JOHNSON, BOOBY**
STREET ADDRESS **2001 PALMETTO AVENUE**
CITY-ST-ZIP **SANFORD FL 32771**

TITLE **T** ☒ Delete
NAME **KELLER, ARLENE**
STREET ADDRESS **507 ROWER ROAD**
CITY-ST-ZIP **SANFORD FL 32771**

TITLE **AT** ☐ Delete
NAME **CORLEY, KAREN**
STREET ADDRESS **970 LEMON BLUFF RD**
CITY-ST-ZIP **OSTEEN FL 32764**

TITLE **D** ☐ Delete
NAME **SHARP, DAVID**
STREET ADDRESS **401 ORANGE AVENUE**
CITY-ST-ZIP **SANFORD FL 32771**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Change ☒ Addition
NAME **Litzenberg, Lester**
STREET ADDRESS **405 Orange Avenue**
CITY-ST-ZIP **Sanford FL 32771**

TITLE **V** ☒ Change ☐ Addition
NAME **Brendle, David**
STREET ADDRESS **1189 Naomi Lane**
CITY-ST-ZIP **Sanford FL 32773**

TITLE **AT** ☒ Change ☐ Addition
NAME **Faye Jordan**
STREET ADDRESS **620 Mexico Court**
CITY-ST-ZIP **Sanford FL 32771**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *X Lester Litzenberg*