


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 29, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N50379</b> 1. Entity Name FAITH FELLOWSHIP CHURCH OF SANFORD, INC.	
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Principal Place of Business 1000 E. FIRST ST SANFORD, FL 32771	Mailing Address 1000 E. FIRST ST SANFORD, FL 32771
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DO NOT WRITE IN THIS SPACE



04282008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2399111	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  SHARP, DAVID 401 ORANGE AVE SANFORD, FL 32771
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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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

<b>Filing Fee Is \$61.25 Due by May 1, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LITZENBERG, LESTER 405 ORANGE AVE SANFORD, FL 32771
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BRENDLE, DAVID 1189 NAOMI LN SANFORD, FL 32773
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHARP, DAVID 401 ORANGE AVENUE SANFORD, FL 32771
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05/22/08-30043-010 70.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** David Sharp **4/28/08** **407-547-2474**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #