

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000211

FILED  
Jul 11, 2006  
Secretary of State

Entity Name: MONUMENT OF FAITH, INC.,

## Current Principal Place of Business:

1956 NW 183RD ST  
OPA LOCKA, FL 33056

## New Principal Place of Business:

## Current Mailing Address:

19700 NE 22ND AVE  
NORTH MIAMI BEACH, FL 33180

## New Mailing Address:

FEI Number: 65-0428407      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

FRANCIS, JAMES  
19700 NE 22ND AVE  
NORTH MIAMI BEACH, FL 33180      US

## Name and Address of New Registered Agent:

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:

Title: D ( ) Delete  
Name: FRANCIS, SHANCE D  
Address: 19700 NE 22ND AVE  
City-St-Zip: NORTH MIAMI BEACH, FL

Title: VPS ( ) Delete  
Name: FRANCIS, EDNA  
Address: 19700 NE 22ND AVE  
City-St-Zip: NORTH MIAMI BCH, FL 33180

Title: T ( ) Delete  
Name: HARRIS, YVONNE  
Address: 18333 NW 144 CT  
City-St-Zip: OPA LOCKA, FL 33055

Title: PCEO ( ) Delete  
Name: FRANCIS, JAMES N  
Address: 19700 NE 22ND AVE  
City-St-Zip: N MIAMI BCH, FL 33180

Title: A ( ) Delete  
Name: JOHNSON, SYDNEY O  
Address: 5213 SW 118TH AVENUE  
City-St-Zip: NORTH MIAMI BEACH, FL

Title: D ( ) Delete  
Name: BOGLE, HERMA  
Address: 1957 NE 177TH STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: EDNA J FRANCIS

VPS

07/11/2006

Electronic Signature of Signing Officer or Director

Date