

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002609

FILED
Mar 16, 2007
Secretary of State

Entity Name: THE FAITH CENTER, INC.

Current Principal Place of Business:

5555 NW 95TH AVE.
SUNRISE, FL 33351 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 9726
FORT LAUDERDALE, FL 33310 US

New Mailing Address:

FEI Number: 65-0252132

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FERNANDEZ, HENRY
5555 NW 95TH AVE.
SUNRISE, FL 33351 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: PD () Delete
Name: FERNANDEZ, HENRY
Address: 4007 SANDERLING LANE
City-St-Zip: WESTON, FL 33331

Title: SD () Delete
Name: FERNANDEZ, CAROL
Address: 4007 SANDERLING LANE
City-St-Zip: WESTON, FL 33331

Title: TD () Delete
Name: SIMS, EDDIE
Address: 7951 SW 7TH ST
City-St-Zip: N LAUDERDALE, FL

Title: D () Delete
Name: SMITH, JACOB J
Address: 1348 AVON LANE #813
City-St-Zip: N. LAUDERDALE, FL 33068

Title: D () Delete
Name: HINDS, MORRIS
Address: 4890 NW 7TH ST
City-St-Zip: PLANTATION, FL 33317

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:

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: EDDIE SIMS

D,T

03/16/2007

Electronic Signature of Signing Officer or Director

Date