

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002538

FILED  
Jan 06, 2007  
Secretary of State

Entity Name: FAITH CRUSADE FOR CHRIST CHURCH CENTER, INC.

**Current Principal Place of Business:**

7604 NW 22ND AVE  
MIAMI, FL 33147

**New Principal Place of Business:**

**Current Mailing Address:**

7604 NW 22ND AVE  
MIAMI, FL 33147

**New Mailing Address:**

FEI Number: 65-0584350      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BURKES, LAWRENCE  
7604 NW 22ND AVE  
MIAMI, FL 33147 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: P ( ) Delete  
Name: BURKES, LAWRENCE SR  
Address: 7604 NW 22 AV  
City-St-Zip: MIAMI, FL 33147

Title: V ( ) Delete  
Name: GIBSON, ALAVAN  
Address: 16410 NW 23RD CT.  
City-St-Zip: MIAMI, FL 33054

Title: S ( ) Delete  
Name: MATHES, JOYCE  
Address: 1826 NW 64TH ST  
City-St-Zip: MIAMI, FL 33147

Title: T ( ) Delete  
Name: GAINER, CELESTE  
Address: 1422 NW 40TH ST  
City-St-Zip: MIAMI, FL 33142

Title: T ( ) Delete  
Name: EDWARDS, ALPHONSO  
Address: 1770 NW 76ST  
City-St-Zip: MIAMI, FL 33142

Title: T ( ) Delete  
Name: MATHES, CHARLES  
Address: 1826 NW 64TH ST.  
City-St-Zip: MIAMI, FL 33147

**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 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: LAWRENCE BURKES

P

01/06/2007

Electronic Signature of Signing Officer or Director

Date