## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9600000714

FILED Jun 02, 2008 Secretary of State

Entity Name: FAITH COVENANT COMMUNITY CHURCH OF AMERICA, INC.

Current Principal Place of Business:			New Principal Place of Business:	
1912 NEBR PALM HARI	ASKA AVE BOR, FL 34683	US		
Current Mailing Address:			New Mailing Address:	
35246 US 19 NORTH #200				
PALM HARBOR, FL 34684 US				
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the			· · · · ·	Certificate of Status Desired (X)  of New Registered Agent:
JOHNSON, STEPHEN A PD 1646 EAST GROVELEAF AVE. PALM HARBOR, FL 34683 US				
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 Sig	nature of Registered Agent		Date
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( ) Delete JOHNSON, STEPHEN 1646 E. GORVELEAF PALM HARBOR, FL 3	A DR. AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VPDT ( ) Delete WILLIAMS, WAYNE L 4558 G-4 ROSWELL ATLANTA, GA 30342	DR.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	SD () Delete YOUNG, JUDITH 1340 PALMER LANE PALM HARBOR, FL 3		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	D ( ) Delete SAMMON, BERNARD 1702 INDIANA AVE PALM HARBOR, FL 3	J	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	D () Delete JOHNSON, SUZANNE 1646 E. GROVELEAF PALM HARBOR, FL 3	S DR. AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete GOOSEN, RONALD 2640 CAMILLE DR. PALM HARBOR, FL 3		Title: Name: Address: City-St-Zip:	() Change () Addition
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: STEPHEN A. JOHNSON PD 06/02/2008 Date