

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001982

Entity Name: FAITH THEATRE, INC.

FILED
Oct 01, 2004
Secretary of State

Current Principal Place of Business:

1315 N BRONOUGH STREET
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

1315 N BRONOUGH STREET
TALLAHASSEE, FL 32303 US

Current Mailing Address:

1315 N BRONOUGH STREET
TALLAHASSEE, FL 32303 US

New Mailing Address:

FEI Number: 59-3272323 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTT, CHERYL
1315 N BRONOUGH STREET
TALLAHASSEE, FL 32301

Name and Address of New Registered Agent:

SCOTT, CHERYL
1315 N BRONOUGH STREET
TALLAHASSEE, FL 32303 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:

10/01/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: MDP () Delete
Name: SCOTT, CHERYL
Address: 1315 N BRONOUGH ST
City-St-Zip: TALLAHASSEE, FL

Title: VD () Delete
Name: SHAFFER, TAMILYNN
Address: 2407 TUPELO TERRACE
City-St-Zip: TALLAHASSEE, FL 32303

Title: SD () Delete
Name: SCOTT, JOHN
Address: 1315 N BRONOUGH ST
City-St-Zip: TALLAHASSEE, FL 32303

Title: TD (X) Delete
Name: WOOD, AUDREY
Address: 510 WEST EIGHTH AVE.
City-St-Zip: TALLAHASSEE, FL 32311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MDP (X) Change () Addition
Name: SCOTT, CHERYL
Address: 1315 N BRONOUGH ST
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: VD (X) Change () Addition
Name: SCULL, ANN
Address: 1480 GOODWOOD CT
City-St-Zip: TALLASSEE, FL 32303 US

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 Section 119.07(3)(i), 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: ANN SCULL

VD

10/01/2004

Electronic Signature of Signing Officer or Director

Date