2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 10, 2007
Secretary of State

DOCUMENT# N96000002387

Entity Name: FAITH BIBLE MINISTRY OF TRINITY TRIUNE TABERNACLE, INCORPORATED

Current Principal Place of Business:

1011 S SANFORD AVE
SANFORD, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

1011 S SANFORD AVE
SANFORD, FL 32771 US

New Mailing Address:

FEI Number: 59-3390573 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

JUNE, ELIJAH
1011 S SANFORD AVE
SANFORD, FL 32771 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: JUNE, ELIJAH
Address: 1414 BENT OAKS BLVD.
City-St-Zip: DELAND, FL 32724

Title: D ( ) Delete
Name: JUNE, EDNA
Address: 1414 BENT OAKS BLVD.
City-St-Zip: DELAND, FL 3272

Title: D ( ) Delete
Name: EUDELL, JAMES
Address: 120 ANDERSON AVE
City-St-Zip: SANFORD, FL 32771

Title: D ( ) Delete
Name: CROWLEY, RILEY
Address: 2580 RIDGEWOOD AVE
City-St-Zip: SANFORD, FL 32771

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:

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: ELIJAH JUNE PAS 09/10/2007

Electronic Signature of Signing Officer or Director — Date