2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

14.4	#		F419	571
	ŧ	į.	À.,,	ŀ
1	Ţ	754	B	ř.

07 HI 17 PH 3: 39

DOCUMENT # N9700000357 1. Entity Name FAITH FAMILY RESOURCE CENTER, INC.				3/		eny of state esse, florida	
Principal Plac 703 COBLET TALLAHASSE		Mailing Address 703 COBLE DRIVE TALLAHASSEE, FL 3230	on US	4		30353! 91005 **:	122.50
	Place of Business - No P.O. Box # COURCE ALE #, etc.	3. Mailing Address P. O. Bo X Suite, Apt. #, etc.	5972	07470007	ng-NP	CR2E037 (12/06)	
City & Stat	hassee	Tallahas	90 <u>2</u>	4. FEI Number 59-342155	6		pplied For
2 3 3 0	Country	32314	Country	5. Certificate of St	atus Desired	□ \$8.75 Ad Fee Require	ditional
	6. Name and Address of Current	Registered Agent	Name IN	7. Name and Add	ress of New Ro	egistered Agent	
	N, HOWARD F		TV	owind McM.	119N		
703 COBL		0	Street Addr	ess (P.O. Box Number is f		•	
210	SSEE, FL 32301 Laura C66 Au	4،سلا	310	Laurale	6 AU	16 NUD	
Tall			City	allahus	See	FL Zip Coo	230
8. The above	named entity submits this statement for	r the purpose of changing its re	egistered office or reg	gistered agent, or both, in	the State of Flor	rida. I am familiar with	and accept
the obligat	ions of registered agent.				1	/ _	
SIGNATURE .	Signature, typed or printengame of registered agent	and title if applicable. (NOTE: I	Registered Agent signature re	equired when reinstating)	71	(7 O 7	
	Signature types of printe-came of registered agent Filling Fee is \$61.25 ue by September 14, 2007	and title if applicable. (NOTE: 1 9. Election Camp Trust Fund Co	paign Financing	\$5.00 May Be Added to Fees		DATE DATE ake check payable to da Department of S	
	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIF	9. Election Camp Trust Fund Co	paign Financing	\$5.00 May Be Added to Fees	Flori	ake check payable t	tate
Do	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIE	9. Election Camp Trust Fund Co	paign Financing Intribution.	\$5.00 May Be Added to Fees ADDITIONS/CHANGI	Flori	ake check payable to da Department of S	tate N 10 Addition
D:	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIF	9. Election Camp Trust Fund Co	paign Financing ntribution.	\$5.00 May Be Added to Fees ADDITIONS/CHANGI	Flori	ake check payable to da Department of S	tate N 10 Addition
D: 10. Title NAME	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIF PD MCMILLAN, HOWARD F 703 COBLE DRIVE TALLAHASSEE, FL 32301	9. Election Camp Trust Fund Co	paign Financing Intribution. 11. TITLE NAME TO DESCRIPTION OF THE PROPERTY OF THE PROPER	\$5.00 May Be Added to Fees ADDITIONS/CHANGI	Flori	ake check payable to de Department of S	tate N 10 Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIF PD MCMILLAN, HOWARD F 703 COBLE DRIVE TALLAHASSEE, FL 32301 SD	9. Election Camp Trust Fund Co	paign Financing Intribution. Intribution. Intribution. Intribution. Intribution. Intribution Intributi	\$5.00 May Be Added to Fees ADDITIONS/CHANGI	Flori	ake check payable to da Department of S	tate N 10 Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIF PD MCMILLAN, HOWARD F 703 COBLE DRIVE TALLAHASSEE, FL 32301	9. Election Camp Trust Fund Co	paign Financing Intribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees ADDITIONS/CHANGI	Flori	Ake check payable to da Department of S RS AND DIRECTORS IN THE TRANSPORT THE	N 10 Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIF PD MCMILLAN, HOWARD F 703 GOBLE DRIVE TALLAHASSEE, FL 32301 SD EDWARDS, PATRICIA 703 COBLE DRIVE TALLAHASSEE, FL 32301	9. Election Camp Trust Fund Co	paign Financing Intribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	\$5.00 May Be Added to Fees ADDITIONS/CHANGI	Flori	Ake check payable to da Department of S RS AND DIRECTORS IN THE TRANSPORT THE	N 10 Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIF PD MCMILLAN, HOWARD F 703 GOBLE DRIVE TALLAHASSEE, FL 32301 SD EDWARDS, PATRICIA 703 COBLE DRIVE TALLAHASSEE, FL 32301 TD	9. Election Camp Trust Fund Co	paign Financing ntribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	\$5.00 May Be Added to Fees ADDITIONS/CHANGI	Flori ES TO OFFICEF CES Cr	ake check payable to da Department of S RS AND DIRECTORS IN Change CS S R P Change	Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIF PD MCMILLAN, HOWARD F 703 COBLE DRIVE TALLAHASSEE, FL 32301 SD EDWARDS, PATRICIA 703 COBLE DRIVE TALLAHASSEE, FL 32301 TD ANDERSON, CLARENCE	9. Election Camp Trust Fund Co BECTORS Delete	paign Financing ntribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	\$5.00 May Be Added to Fees ADDITIONS/CHANGI	Flori ES TO OFFICEF CES Cr	ake check payable to da Department of S RS AND DIRECTORS IN Change CS S R P Change	Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIF PD MCMILLAN, HOWARD F 703 GOBLE DRIVE TALLAHASSEE, FL 32301 SD EDWARDS, PATRICIA 703 COBLE DRIVE TALLAHASSEE, FL 32301 TD	9. Election Camp Trust Fund Co BECTORS Delete	paign Financing ntribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	\$5.00 May Be Added to Fees ADDITIONS/CHANGI	Flori ES TO OFFICEF CES Cr	ake check payable to da Department of S RS AND DIRECTORS IN Change CS S R P Change	Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIF PD MCMILLAN, HOWARD F 703 GOBLE DRIVE TALLAHASSEE, FL 32301 SD EDWARDS, PATRICIA 703 COBLE DRIVE TALLAHASSEE, FL 32301 TD ANDERSON, CLARENCE 703 COBLE DRIVE	9. Election Camp Trust Fund Co BECTORS Delete	Daign Financing Intribution. Interior Intribution. Interibution. Intribution. Intri	\$5.00 May Be Added to Fees ADDITIONS/CHANGI	Flori ES TO OFFICEF CES Cr	ake check payable to da Department of S RS AND DIRECTORS IN Change CS S R P Change	Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIF PD MCMILLAN, HOWARD F 703 GOBLE DRIVE TALLAHASSEE, FL 32301 SD EDWARDS, PATRICIA 703 COBLE DRIVE TALLAHASSEE, FL 32301 TD ANDERSON, CLARENCE 703 COBLE DRIVE	9. Election Camp Trust Fund Co RECTORS Delete Delete	Daign Financing Intribution. Interior Intribution. Interior. Intribution. Interior. Intribution. Interior. Intribution. Interior. Intribution. Intribution. Intribution. Intribution. Intribution. Intribution. Intribution. Intribution. Intribution. Intri	\$5.00 May Be Added to Fees ADDITIONS/CHANGI	Flori ES TO OFFICEF CES Cr	ake check payable of da Department of S RS AND DIRECTORS IN Change CS S R P Change Change Change	Addition Addition Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIF PD MCMILLAN, HOWARD F 703 GOBLE DRIVE TALLAHASSEE, FL 32301 SD EDWARDS, PATRICIA 703 COBLE DRIVE TALLAHASSEE, FL 32301 TD ANDERSON, CLARENCE 703 COBLE DRIVE	9. Election Camp Trust Fund Co RECTORS Delete Delete	Daign Financing Intribution. Interior Intribution. Interibution. Intribution. Intri	\$5.00 May Be Added to Fees ADDITIONS/CHANGI	Flori ES TO OFFICEF CES Cr	ake check payable of da Department of S RS AND DIRECTORS IN Change CS S R P Change Change Change	Addition Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIF PD MCMILLAN, HOWARD F 703 GOBLE DRIVE TALLAHASSEE, FL 32301 SD EDWARDS, PATRICIA 703 COBLE DRIVE TALLAHASSEE, FL 32301 TD ANDERSON, CLARENCE 703 COBLE DRIVE	9. Election Camp Trust Fund Co RECTORS Delete Delete	Daign Financing Intribution. Intribution. Intribution. Intribution. Intribution. Intribution. Intribution. Intribution. Intribution STREET ADDRESS CITY-ST-ZIP INTIBUTION AND STREET ADDRESS CITY-ST-Z	\$5.00 May Be Added to Fees ADDITIONS/CHANGI	Flori ES TO OFFICEF CES Cr	ake check payable of da Department of S RS AND DIRECTORS IN Change CS S R P Change Change Change	Addition Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIF PD MCMILLAN, HOWARD F 703 GOBLE DRIVE TALLAHASSEE, FL 32301 SD EDWARDS, PATRICIA 703 COBLE DRIVE TALLAHASSEE, FL 32301 TD ANDERSON, CLARENCE 703 COBLE DRIVE	9. Election Camp Trust Fund Co RECTORS Delete Delete Delete	Daign Financing Intribution. Intribution. Intribution. Intribution. Intribution. Intribution. Intribution. Intribution Intribution. Intribution Intribution. Interibution. Intribution. Intributi	\$5.00 May Be Added to Fees ADDITIONS/CHANGI	Flori ES TO OFFICEF CES Cr	ake check payable of da Department of S RS AND DIRECTORS IN Change CS S P P Change Change Change	Addition Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIF PD MCMILLAN, HOWARD F 703 GOBLE DRIVE TALLAHASSEE, FL 32301 SD EDWARDS, PATRICIA 703 COBLE DRIVE TALLAHASSEE, FL 32301 TD ANDERSON, CLARENCE 703 COBLE DRIVE	9. Election Camp Trust Fund Co RECTORS Delete Delete Delete	Daign Financing Intribution. Intribution. Intribution. Intribution. Intribution. Intribution. Intribution. Intribution. Intribution STREET ADDRESS CITY-ST-ZIP INTIBUTION AND STREET ADDRESS CITY-ST-Z	\$5.00 May Be Added to Fees ADDITIONS/CHANGI	Flori ES TO OFFICEF CES Cr	ake check payable of da Department of S RS AND DIRECTORS IN Change CS S P P Change Change Change	Addition Addition Addition
TIO. THE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIF PD MCMILLAN, HOWARD F 703 GOBLE DRIVE TALLAHASSEE, FL 32301 SD EDWARDS, PATRICIA 703 COBLE DRIVE TALLAHASSEE, FL 32301 TD ANDERSON, CLARENCE 703 COBLE DRIVE	9. Election Camp Trust Fund Co RECTORS Delete Delete Delete	Daign Financing Intribution. Interior Inter	\$5.00 May Be Added to Fees ADDITIONS/CHANGI	Flori ES TO OFFICEF CES Cr	ake check payable of da Department of S RS AND DIRECTORS IN Change CS S P P Change Change Change	Addition Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIF PD MCMILLAN, HOWARD F 703 GOBLE DRIVE TALLAHASSEE, FL 32301 SD EDWARDS, PATRICIA 703 COBLE DRIVE TALLAHASSEE, FL 32301 TD ANDERSON, CLARENCE 703 COBLE DRIVE	9. Election Camp Trust Fund Co RECTORS Delete Delete Delete Delete	Daign Financing Intribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	\$5.00 May Be Added to Fees ADDITIONS/CHANGI	Flori ES TO OFFICEF CES Cr	ake check payable of da Department of S RS AND DIRECTORS IN Change CS S P P Change Change Change	Addition Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIF PD MCMILLAN, HOWARD F 703 GOBLE DRIVE TALLAHASSEE, FL 32301 SD EDWARDS, PATRICIA 703 COBLE DRIVE TALLAHASSEE, FL 32301 TD ANDERSON, CLARENCE 703 COBLE DRIVE	9. Election Camp Trust Fund Co RECTORS Delete Delete Delete Delete	Daign Financing Intribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	\$5.00 May Be Added to Fees ADDITIONS/CHANGI	Flori ES TO OFFICEF CES Cr	ake check payable of da Department of S RS AND DIRECTORS IN Change CS S P P Change Change Change	Addition Addition Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE WAS PYFED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Onte