2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2009
Secretary of State

DOCUMENT# N97000003621

Entity Name: JOY OF FAITH CHRISTIAN CENTER, INC.

Current Principal Place of Business:

941 S. MILITARY TRAIL
#F3
WEST PALM BEACH, FL 33415 US

New Principal Place of Business:

2200 N FLORIDA MANGO RD
304
WEST PALM BEACH, FL 334096449 US

Current Mailing Address:

941 S. MILITARY TRAIL
#F3
WEST PALM BEACH, FL 33415 US

New Mailing Address:

2200 N FLORIDA MANGO RD
304
WEST PALM BEACH, FL 334096449 US

FEI Number: 65-0638616 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COOK, ROBERT D
1397 RED PINE TRAIL
WELLINGTON, FL 33414 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: COOK, ROBERT D
Address: 1397 RED PINE TRAIL
City-St-Zip: WELLINGTON, FL 33414

Title: D ( ) Delete
Name: COOK, HELLEN M
Address: 1397 RED PINE TRAIL
City-St-Zip: WELLINGTON, FL 33414

Title: D ( ) Delete
Name: SMITH, TRACEY A
Address: 185 MISTY RIDGE TRAIL
City-St-Zip: STOCKBRIDGE, GA 30281

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: SMITH, TRACY A
Address: 185 MISTY RIDGE TRAIL
City-St-Zip: STOCKBRIDGE, GA 30281

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: ROBERT D. COOK REV. 04/06/2009

Electronic Signature of Signing Officer or Director Date