2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2005
Secretary of State

DOCUMENT# N97000004014

Entity Name: FAITH RADIO NETWORK INC.

Current Principal Place of Business:

4015 N MONROE ST
TALLAHASSEE, FL 32303 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 181000
TALLAHASSEE, FL 32318 US

New Mailing Address:

FEI Number: 62-1701840 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCOTT BEIGLE
45 BERT RIDGE RD.
HAVANA, FL 32333 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: PD ( ) Delete
Name: BEIGLE, SCOTT
Address: 45 BERT RIDGE RD.
City-St-Zip: HAVANA, FL 32333

Title: VD ( ) Delete
Name: BEIGLE, BRENDA
Address: 45 BERT RIDGE RD.
City-St-Zip: HAVANA, FL 32333

Title: SD (X) Delete
Name: SHEPHERD, LOLA
Address: 2485 FARRIS AVENUE
City-St-Zip: PENSACOLA, FL 32526

Title: TD ( ) Delete
Name: SHEPHERD, HERBERT
Address: 2485 FARRIS AVENUE
City-St-Zip: PENSACOLA, FL 32526

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: TD (X) Change ( ) Addition
Name: SHEPHERD, HERBERT
Address: 75 BERT RIDGE RD.
City-St-Zip: HAVANA, FL 32333

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: HERBERT SHEPHERD TD 03/23/2005

Electronic Signature of Signing Officer or Director — Date