

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004014

FILED  
Apr 14, 2008  
Secretary of State

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: SECR ( ) Delete  
Name: HILL, CHARLES  
Address: 3601 GARDENVIEW WAY  
City-St-Zip: TALLAHASSEE, FL 32309

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## 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: TREA ( ) Change (X) Addition  
Name: CAPPELEN, JOHN MR.  
Address: 43181 CALLE VENTURA  
City-St-Zip: TEMECULA, CA 92592

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: BRENDA BEIGLE

TREA

04/14/2008

Electronic Signature of Signing Officer or Director

Date