2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005228

Entity Name: CHRISTIAN FAITH CHURCH, INC.

FILED Apr 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1020 TROPICAL DRIVE BRADENTON, FL 34208

Current Mailing Address: New Mailing Address:

CHRISTIAN FAITH CHURCH, INC. PO BOX 21248 BRADENTON, FL 34204

FEI Number: 65-0827473 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JACKSON, FREDERICK D 1020 TROPICAL DR. BRADENTON, FL 34208 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS: () Delete (X) Change () Addition HALL DOROTHEA SELVER, LAUREL Name: Name: 2606 49TH DRIVE EAST BLDG # 8 Address: 2803 7ST. EAST Address: City-St-Zip: BRADENTON, FL 34284 City-St-Zip: BRADENTON, FL 34208 Title: DS () Delete Title: () Change () Addition JACKSON, TESS Name: Name: Address: 5211 JERSEY AVE SO Address: City-St-Zip: ST PETERSBURG, FL 33707 City-St-Zip: Title: () Delete Title: () Change () Addition JACKSON, FREDERICK D Name: Name: 1020 TROPICAL DRIVE Address: Address: City-St-Zip: BRADENTON, FL 34208 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ELLENWOOD, FERN Name: Address: 2211 2ND AVE. EAST Address: City-St-Zip: PALMETTO, FL 34221 City-St-Zip: Title: () Delete Title: () Change () Addition ROMAIN, NICOLE Name: Name: 501 20TH AVE WEST Address: Address:

City-St-Zip: BRADENTON, FL 34205 City-St-Zip: Title: () Delete Title: () Change () Addition

WAITERS, BARBARA Name: Name: Address: 2313 19ST EAST Address: BRADENTON, FL 34208 City-St-Zip: 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: FREDERICK D. JACKSON PD 04/16/2009