## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000000979

Entity Name: FAITH LINEN SERVICE, INC.

FILED Jun 08, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 7576 SAN JOSE BLVD JACKSONVILLE, FL 32217 **Current Mailing Address: New Mailing Address:** 7576 SAN JOSE BLVD JACKSONVILLE, FL 32217 FEI Number: 59-3585439 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GARCIA, LILLIAN 7576 SAN JOSE BLVD JACKSONVILLE, FL 32217 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete STONE, RICHARD Name: Name: Address: 3500 UNIV. BLVD. N #1401 Address: City-St-Zip: JACKSONVILLE, FL 32277 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: STONE, TERESA Name: Address: 3500 UNIV. BLVD., N. #1401 Address: City-St-Zip: JACKSONVILLE, FL 32277 City-St-Zip: Title: SD () Delete Title: () Change () Addition LUNDY, DEBORAH Name: Name: 1182 SURREY GLENN ROAD Address: Address: City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: Title: TD () Delete Title: () Change () Addition WILSON, EVELINA Name: Name: P.O. BOX 54 Address: Address: City-St-Zip: WELAKA, FL 32193 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition GARCIA, LILLIAN GARCIA, LILLIAN Name: Name: 121 EAST 8TH ST 7576 SAN JOSE BLVD. Address: Address: City-St-Zip: JACKSONVILLE, FL 32206 City-St-Zip: JACKSONVILLE, FL 32217 Title: () Delete Title: () Change () Addition COLLINS, DONNA Name: Name: Address: 736 TAMERIANE ST. Address: DELTONA, FL 32725 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: RICHARD J. STONE PRES 06/08/2009