

FILE NOW: FILING FEE IS \$61.25

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Mar 16 1999 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # N98000003421		
1. Corporation Name FAITH INITIATIVE TEAM, INC.		

Principal Place of Business 348 MIRACLE STRIP PARKWAY SW PARADISE VILLAGE, SUITE 1 FORT WALTON BEACH FL 32548	Mailing Address 348 MIRACLE STRIP PARKWAY SW PARADISE VILLAGE, SUITE 1 FORT WALTON BEACH FL 32548
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03/16/99 90060 043 70.00

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	06/08/1998
22. City & State	27. City & State	4. FEI Number
23. Zip	28. Zip	59-3510953
24. Country	29. Country	5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required
25. Country	30. Country	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
TERRY, WILLIAM R 363 MIRACLE STRIP PARKWAY SW FORT WALTON BEACH FL 32548	81. Name
	82. Street Address (P.O. Box Number is Not Acceptable)
	83. City
	84. Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	C/D ☒ Change ☐ Addition
NAME	HOOPER, PATRICIA S	1.2 NAME	
STREET ADDRESS	348 MIRACLE STRIP PARKWAY SW, STE 1	1.3 STREET ADDRESS	
CITY-ST-ZIP	FORT WALTON BEACH FL 32548	1.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	SAMSON, JONATHAN D	2.2 NAME	
STREET ADDRESS	428 RACETRACK RD NE	2.3 STREET ADDRESS	
CITY-ST-ZIP	FORT WALTON BEACH FL 32547	2.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	HESTER, JOHN C	3.2 NAME	
STREET ADDRESS	435 BRIDGEWATER COURT	3.3 STREET ADDRESS	
CITY-ST-ZIP	MARY ESTHER FL 32569	3.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	4.1 TITLE	T/D ☒ Change ☐ Addition
NAME	ARMSTRONG, LUTHER J	4.2 NAME	
STREET ADDRESS	430 TANGLEWOOD DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	FORT WALTON BEACH FL 32547	4.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	GWYN, JIM	5.2 NAME	
STREET ADDRESS	405 NW OAKLAND CIR	5.3 STREET ADDRESS	
CITY-ST-ZIP	FORT WALTON BEACH FL 32548	5.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	JAMES, JIMMY JR	6.2 NAME	
STREET ADDRESS	340 N BEAL PARKWAY	6.3 STREET ADDRESS	
CITY-ST-ZIP	FORT WALTON BEACH FL 32548	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Patricia S. Hooper **Patricia S. Hooper** 1/29/99 (850) 244-1319

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1999 Nonprofit Corporation Annual Report

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Faith Initiative Team, Inc.

FEI Number: 59-3510953

Section 13 Continued

Additions to Officers and Directors

V/D

Terry, William R.
363 Miracle Strip Parkway, SW
Fort Walton Beach, FL 32548

S/D

Williams, Audrey
311 N.W. Lovejoy Road
Fort Walton Beach, FL 32548