

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000003506

**FILED**  
**Jan 11, 2011**  
**Secretary of State**

**Entity Name:** MIDWAY HOUSE OF FAITH, INC.

**Current Principal Place of Business:**

1758 WOODLAWN BEACH RD.  
GULF BREEZE, FL 325637613

**New Principal Place of Business:**

**Current Mailing Address:**

1758 WOODLAWN BEACH RD.  
GULF BREEZE, FL 325637613

**New Mailing Address:**

**FEI Number:** 59-3503898

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JORDAN, BAMA L  
2062 BERGREN ROAD  
GULF BREEZE, FL 32563 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:** PCSD  
**Name:** JORDAN, BAMA L  
**Address:** 2062 BERGREN ROAD  
**City-St-Zip:** GULF BREEZE, FL 32563

**Title:** VDT  
**Name:** JORDAN, JONATHAN  
**Address:** 2266 NICKVALLY ROAD  
**City-St-Zip:** BOWMAN, GA 30624

**Title:** STD  
**Name:** JOHNSON, CATHIE  
**Address:** 5417 HARMONY LANE  
**City-St-Zip:** GULF BREEZE, FL 32563

**Title:** DT  
**Name:** WALTERS, TAMMY J  
**Address:** 4605 GULF BREEZE PKWY.  
**City-St-Zip:** GULF BREEZE, FL 32563

I hereby 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 all other like empowered.

**SIGNATURE:** CATHIE JOHNSON

STD

01/11/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date