

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001337

FILED
Mar 15, 2005
Secretary of State

Entity Name: FAITH MINISTRIES OF TALLAHASSEE, INC.

Current Principal Place of Business:

3333 APALACHEE PARKWAY
TALLAHASSEE, FL 32311

New Principal Place of Business:

Current Mailing Address:

3333 APALACHEE PARKWAY
TALLAHASSEE, FL 32311

New Mailing Address:

FEI Number: 59-3564344

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SELF, MELBRON E
3333 APALACHEE PARKWAY
TALLAHASSEE, FL 32311 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: VD () Delete
Name: RICHSTONE, MARSHA
Address: 1118 LOMPOC COURT
City-St-Zip: TALLAHASSEE, FL 32311

Title: STD () Delete
Name: RICHSTONE, GREGG
Address: 1118 LOMPOC COURT
City-St-Zip: TALLAHASSEE, FL 32311

Title: D () Delete
Name: DALE, CAROL
Address: 3600 BUCKNER COURT
City-St-Zip: TALLAHASSEE, FL 32311

Title: D () Delete
Name: SELF, MELBRON E
Address: 2306 W. INDIANHEAD DR.
City-St-Zip: TALLAHASSEE, FL 32301

Title: PD () Delete
Name: FOX, STEPHEN
Address: 60 BOB WHITE TRAIL
City-St-Zip: MONTICELLO, FL 32344

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: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CAROL C. DALE

D

03/15/2005

Electronic Signature of Signing Officer or Director

Date