

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002413

FILED
Jan 04, 2007
Secretary of State

Entity Name: FAMILY OF FAITH COMMUNITY CHURCH OF FORT WALTON BEACH, INC.

Current Principal Place of Business:

428 RACETRACK ROAD NE
FT. WALTON BEACH, FL 32547

New Principal Place of Business:

Current Mailing Address:

428 RACETRACK ROAD NE
FT. WALTON BEACH, FL 32547

New Mailing Address:

FEI Number: 59-1431697

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANSOM, CHARLES JR
206 SOUTH STREET SE
FORT WALTON BEACH, FL 32547 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: PRES () Delete
Name: SANSOM, CHARLES JR.
Address: 428 RACETRACK ROAD NE
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: S/T () Delete
Name: BAUSCH, JANICE
Address: 428 RACETRACK ROAD NE
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: DIR. () Delete
Name: PHAGEN, WILLIAM
Address: 428 RACETRACK RD
City-St-Zip: FT WALTON BEACH, FL 32547

Title: DIR () Delete
Name: SANSOM, CHARLES B SR.
Address: 428 RACETRACK ROAD
City-St-Zip: FT WALTON BEACH, FL 32547

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: JANICE BAUSCH

S/T

01/04/2007

Electronic Signature of Signing Officer or Director

Date