


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 30, 2005 08:00 AM
Secretary of State

DOCUMENT # N99000002618	
1. Entity Name FAITH HOLY TEMPLE EVANGELIST CHURCH, INC.	

Principal Place of Business 1243 W 33RD ST RIVIERA BEACH FL 33404	Mailing Address 1243 W 33RD ST RIVIERA BEACH FL 33404
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/04)

6. Name and Address of Current Registered Agent CHARLOW, REVEREND L 1243 W 33RD ST RIVIERA BEACH FL 33404	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE	DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete D CHARLOW, LESSYE W 1243 W 33RD ST RIVIERA BEACH FL 33404
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete D IVORY, WILLIAM 1550 W 11TH ST RIVIERA BEACH FL 33404
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete AS THOMAS, VERA 1101 MILITARY TRAIL #103 JUPITER FL 33458
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete TD CARTER, JUDY K 10709 DALMANY WAY ROYAL PALM BEACH FL 33411
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete D BROWN, ROBERT SR 1170 W 27TH ST RIVIERA BEACH FL 33404
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete D WILLIAMS, WILLIE E 1441 W 35TH ST RIVIERA BEACH FL 33404

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition U00000281195 03/30/05-80050-008 70.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Judy K. Carter / Judy K. Carter* **3/28/05** **861-610**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #