## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000081416

Entity Name: MY FATHER'S HOUSE FELLOWSHIP, INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
--	--------------------------------------	---------------------------------

479 LANFAIR AVENUE SEBASTIAN, FL 32958

Current Mailing Address: New Mailing Address:

479 LANFAIR AVE P. O. BOX 701480 SEBASTIAN, FL 32958 P. O. BOX 701480 WABASSO, FL 32958

FEI Number: 65-1035948 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SMITH, JOHN J III SMITH, BONITA M
479 LANFAIR AVE
SEBASTIAN, FL 32958 US SEBASTIAN, FL 32958 US

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: BONITA M. SMITH 04/29/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 SMITH, JOHN J III
 Name:
 SMITH, JOHN J III

 Address:
 479 LANFAIR AVE
 Address:
 710 BOWDEN ROAD

 City-St-Zip:
 SEBASTIAN, FL 32958
 City-St-Zip:
 ANDERSON, SC 29626

Title: STD () Delete Title: () Change () Addition

 Name:
 SMITH, BONITA M
 Name:

 Address:
 479 LANFAIR AVE
 Address:

 City-St-Zip:
 SEBASTIAN, FL 32958
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BONITA M. SMITH ST 04/29/2008