

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000089196

Entity Name: GOOD FAITH REALTY, INC.

FILED
Jan 31, 2005
Secretary of State

Current Principal Place of Business:

3160 COUNTRY CREEK LANE
SAINT AUGUSTINE, FL 32086

New Principal Place of Business:

97 MARTIN LUTHER KING
SAINT AUGUSTINE, FL 32084

Current Mailing Address:

3160 COUNTRY CREEK LANE
SAINT AUGUSTINE, FL 32086

New Mailing Address:

97 MARTIN LUTHER KING
SAINT AUGUSTINE, FL 32084

FEI Number: 59-3684602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HAGY, LUTHER W
3160 COUNTRY CREEK LANE
SAINT AUGUSTINE, FL 32086 US

Name and Address of New Registered Agent:

HAGY, LUTHER W
87 MARTIN LUTHER KING
SAINT AUGUSTINE, FL 32084 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:

01/31/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: HAGY, ADA
Address: 3160 COUNTRY CREEK LANE
City-St-Zip: SAINT AUGUSTINE, FL 32086

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: HAGY, ADA
Address: 97 MARTIN LUTHER KING
City-St-Zip: SAINT AUGUSTINE, FL 32084

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ADA HAGY

MRS.

01/31/2005

Electronic Signature of Signing Officer or Director

Date