


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jun 08, 2007 8:00 am**  
**Secretary of State**

06-08-2007 90002 020 \*\*\*150.00

**DOCUMENT # P05000113839**

1. Entity Name  
**GOODFAITH A F C H, INC.**



Principal Place of Business      Mailing Address  
**479 KREFELD RD NW**      **479 KREFELD RD NW**  
**PALM BAY, FL 32907-1009**      **PALM BAY, FL 32907-1009**

**4012020Z**



2. Principal Place of Business - No P.O. Box #      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

05082007      Chg-P      CR2E034 (12/06)

City & State      City & State

4. FEI Number  
**76-0799374**      Applied For  
 Not Applicable

Zip      Country      Zip      Country

5. Certificate of Status Desired       **\$8.75 Additional Fee Required**

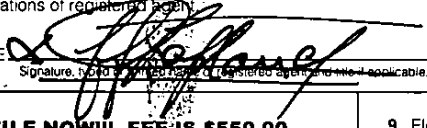
**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**LA PLANCHE, MARC A**  
**479 KREFELD RD NW**  
**PALM BAY, FL 32907-1009**

Name      **Same as # 6**  
 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: **6/6/07**

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 14, 2007**

9. Election Campaign Financing Trust Fund Contribution.       **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LA PLANCHE, MARC A 479 KREFELD RD NW PALM BAY, FL 329071009	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LA PLANCHE, MARIE SUZI 479 KREFELD RD NW PALM BAY, FL 329071009	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>None</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>None</b>		
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 exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:       Date: **6/6/07**      Daytime Phone #

ATTACHMENT  
40120202

Registration Section  
Division of Corporation  
P.O. Box 6327  
Tallahassee, Fl 32314

To Whom It May Concern:


**Re: P05000113839- Annual Corporation Report**

I am writing to let your office know that on May 1, 2007 around 2:23 PM I was filing my Annual Report on your website after updating all my corporation information your systems became frozen. I was unable to continue on the pay now notice. I had clicking and clicking the Pay now button in several times. I turned off the computer rebooted and restarted the computer the same thing happened. I have called my accountant. He could not get it either.

Your systems were down since May 01 2:35 PM to May 2 at 4:00 PM. Therefore, I am asking your office to waive the \$400:00 penalties for me. Please see the attached copies for more information.

If should you have any questions regarding this letter feel free to call me at (321) 956-0869.

Best regards

  
Mr. Marc Laplanche Owner of Good Faith AFCH, Inc.