

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P35742

FILED  
Jan 14, 2008  
Secretary of State

**Entity Name:** LIVING FAITH CHRISTIAN FELLOWSHIP, INC.

**Current Principal Place of Business:**

4923 DARLINGTON RD  
HOLIDAY, FL 34690 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 935  
TARPON SPRINGS, FL 346880935

**New Mailing Address:**

**FEI Number:** 06-1072389

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CERRETA, JOSEPH A PH.D  
4923 DARLINGTON ROAD  
HOLIDAY, FL 34690 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: PD ( ) Delete  
Name: CERRETA, JOSEPH ANTH, ONY  
Address: 6050 CALIBER CT  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VSD ( ) Delete  
Name: CERRETA, DANA MAUREE, N  
Address: 6050 CALIBER CT  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: D ( ) Delete  
Name: WINER, MICHAEL  
Address: 535 HENREY AVE  
City-St-Zip: STRATFORD, CT 06606

Title: TD ( ) Delete  
Name: CESTONE, TONY  
Address: 9 SOMERS TOWN RD  
City-St-Zip: OSSINING, NY 10562

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: CERRETA, JOSEPH A PH.D  
Address: 6050 CALIBER CT  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VSD (X) Change ( ) Addition  
Name: CERRETA, DANA M VSD  
Address: 6050 CALIBER CT  
City-St-Zip: NEW PORT RICHEY, FL 34655

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 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: JOSEPH CERRETA

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01/14/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date