I hereby 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 all other like empowered.

DOCUMENT# N06000001335

Entity Name: FAITH APOSTOLIC MINISTRIES, INC.

Current Principal Place of Business:

3668 W. DAVIE BLVD FT LAUDERDALE, FL 33312

Current Mailing Address:

% DONALD WRIGHT 480 CLANCEY CIRCLE MARGATE, FL 33068

FEI Number: 43-2096090

Name and Address of Current Registered Agent:

WRIGHT, DONALD W 480 CLANCEY CIRCLE MARGATE, FL 33068 US Certificate of Status Desired: No

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.

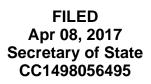
SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Officer/Director Detail.				
	Title	PD	Title	SD
	Name	WRIGHT, DONALD W	Name	EDMON, MERTILYN
	Address	480 CLANCEY CIRCLE	Address	6560 SW 28TH ST.
	City-State-Zip:	MARGATE FL 33068	City-State-Zip:	MIRAMAR FL 33023
	Title	D	Title	S
	Name	HARRIS, SYLVIA	Name	SUTHERLAND, HEATHER
	Address	164 SAN REMO BLVD	Address	5171 WEST OAKLAND PARK BLVD 212P
	City-State-Zip:	NORTH LAUDERDALE FL 33068	City-State-Zip:	LAUDERDALE LAKES FL 33313
	Title	ELDER		
	Name	WESTCARTH, SHONNILEIGH		
	Address	4388 SW 134TH AVE		
	City-State-Zip:	MIRAMAR FL 33027		

Electronic Signature of Signing Officer/Director Detail



Date