

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000005402

Entity Name: FAITH ACTION MINISTRY ALLIANCE INC.**Current Principal Place of Business:**C/O 5107 EAST 32ND AVENUE
TAMPA, FL 33619**Current Mailing Address:**C/O 5107 EAST 32ND AVENUE
TAMPA, FL 33619 US**FEI Number:** 46-4210451**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JOHNSON, ALFRED V
5118 N. 56TH STREET
SUITE 114
TAMPA, FL 33610 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:** ALFRED JOHNSON

02/12/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VC
Name LOCKHART, ANN
Address 579 FINCH CT.
City-State-Zip: KISSIMMEE FL 34759

Title D
Name FLEMING, TERRANCE
Address 9844 IVORY DRIVE
City-State-Zip: RUSKIN FL 33573

Title D
Name WEIHE, GEOFFREY
Address 610 S. ROME AVENUE, APT 401
City-State-Zip: TAMPA FL 33606

Title PRESIDENT, CHAIRMAN
Name JOHNSON, ALFRED VERNON
Address 5118 N. 56TH STREET
SUITE 114
City-State-Zip: TAMPA FL 33610

Title TREASURER
Name ALBERGO, DYLAN
Address 3119 SANTORINI COURT
City-State-Zip: TAMPA FL 33611

Title DIRECTOR
Name SAVITZ, REBECCA B
Address 1021 S. STERLING AVENUE
City-State-Zip: TAMPA FL 33629

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.

SIGNATURE: ALFRED JOHNSON

PRESIDENT

02/12/2024

Electronic Signature of Signing Officer/Director Detail

Date