

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 07, 2008 8:00 am**  
**Secretary of State**

07-07-2008 90003 043 \*\*\*\*61.25

40109693



<b>DOCUMENT # 803387</b> 1. Entity Name <b>THE SALVATION ARMY</b>					
Principal Place of Business % LEGAL DEPARTMENT 1424 NE EXPRESSWAY N.E. ATLANTA, GA 30329			Mailing Address % LEGAL DEPARTMENT 1424 NE EXPRESSWAY N.E. ATLANTA, GA 30329		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number <b>58-0660607</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent <b>HEDGREN, STEVE</b> <b>5631 VAN DYKE RD.</b> <b>LUTZ, FL 33558</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				FL Zip Code	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25</b> <b>Due by September 12, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be</b> <b>Added to Fees</b>	
<b>Make check payable to</b> <b>Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>					
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete	
	C	GAITHER, ISRAEL L	615 SLATERS LANE	ALEXANDRIA, VA	
	P	FEENER, M.S.	1424 N.E. EXPWY.	ATLANTA, GA	
	V	GRIFFIN, TERRY	1424 NE EXPRESSWAY	ATLANTA, GA 30329	
	ATT	MOTHERSHED, DAVID R	1424 NE EXPRESSWAY	ATLANTA, GA	<input checked="" type="checkbox"/> Delete
	TAS	WARD, H. AL	1424 N.E. EXPWY.	ATLANTA, GA	<input checked="" type="checkbox"/> Delete
	S	GOODIER, WILLIAM R N	2880 GRAVITT RD	DULUTH, GA 30096	<input checked="" type="checkbox"/> Delete
<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>					
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
C	GAITHER, ISRAEL L. - T				
P	Feener, M.S. - T				
V	Griffin, Terry - T				
ATT	Ellis, Stephen - T	1424 N.E. Expressway	Atlanta, GA	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TAS	Johnson, Kenneth O., Jr. - T	1424 N.E. Expressway	Atlanta, GA	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
S	Powell, Charles W. - T	1424 N.E. Expressway	Atlanta, GA	<input checked="" 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 617, 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.					
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <b>6/24/08</b> <small>Daytime Phone #</small>	

CHARLES POWELL

SECRETARY