


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Feb 20, 2006 8:00 am  
Secretary of State

02-20-2006 90036 033 \*\*\*\*61.25

DOCUMENT # F9400000262  
1. Entity Name  
CHRISTIAN MILITARY FELLOWSHIP CORPORATION



Principal Place of Business  
3000 S ACOMA ST  
ENGLEWOOD, CO 80110-1510 US

Mailing Address  
P.O. BOX 1207  
ENGLEWOOD, CO 80150-1207 US

60019142



2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

02162006 Chg-NP CR2E037 (11/05)

City & state  
Zip Country

4. FEI Number  
84-0780545

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent  
ROBERTS, WARREN  
1825 TWELVE OAKS LN  
NEPTUNE BEACH, FL 32266

7. Name and Address of Now Registered Agent  
Name  
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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title 0 applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

Filing Fee is \$61.25  
Due by May 1, 2006

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

Make check payable Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M ANDERSON, MELVIN D 3000 S ACOMA ST ENGLEWOOD, CO 801101510 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOKATLOGLOU, C N 4362 W TUFTS AVE ENGLEWOOD, CO 802363429 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLYNN, ROBERT W 3000 S ACOMA ST ENGLEWOOD, CO 801 10 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TROUT, JEFFREY R 4616 KETCHWOOD CIRCLE HIGHLANDS RANCH, CO 801308803 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DUNN, PETER H 11239 S PARILMENT WAY PARKER, CO 801387353 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P (PRESIDENT) DUNN, PETER H 11239 S PARILMENT WAY PARKER, CO 801387353 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BINGHAM, ROBERT J 4275 S BROADWAY ENGLEWOOD, CO 801 10 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D (DIRECTOR) BINGHAM, ROBERT J 4275 S BROADWAY ENGLEWOOD, CO 80110 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HOSKINS, LARRY 19950 E ELDORADO DR AURORA, CO 805038001 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BREWER, GARRY L 19930 E BELLEVIEW LN CENTENNIAL, CO 800153701 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARTWRIGHT, DANIEL L 1200 S ONEIDA ST APT 11-203 DENVER, CO 80224 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEHAMER, BRENT L 9171 SUGARSTONE CIRCLE HIGHLANDS RANCH, CO 801304431 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this 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.

SIGNATURE:  ROBERT W FLYNN 02/15/2006 (303) 761-1959  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #