

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005105

FILED  
Apr 28, 2010  
Secretary of State

**Entity Name:** ACREAGE SDA FELLOWSHIP, INC.

**Current Principal Place of Business:**

14911 ORANGE BOULEVARD  
LOXAHATCHEE, FL 33470

**New Principal Place of Business:**

**Current Mailing Address:**

14911 ORANGE BOULEVARD  
LOXAHATCHEE, FL 33470

**New Mailing Address:**

FEI Number: 26-2710369

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BALFOUR, DALE  
14911 ORANGE BLVD.  
LOXAHATCHEE, FL 33470 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: P  
Name: FAGAN, CEBERT  
Address: 2322 PRARIEVIEW DRIVE  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VP  
Name: BALFOUR, DALE  
Address: 4669 MANDERLY DRIVE  
City-St-Zip: WELLINGTON, FL 33449

Title: T  
Name: FAGAN, EDNA  
Address: 2322 PRARIEVIEW DRIVE  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: S  
Name: GREENIDGE, DENNIS  
Address: 12714 79TH COURT  
City-St-Zip: WEST PALM BEACH, FL 33412

Title: S  
Name: KANKAM, EDWARD  
Address: 1395 STATE ROAD 7, SUITE 400  
City-St-Zip: WELLINGTON, FL 33414

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: CEBERT FAGAN

P

04/28/2010

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

\_\_\_\_\_  
Date