


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90309 005 ****70.00

DOCUMENT # N15981			
1. Entity Name BRANDON CHRISTIAN FELLOWSHIP, INC.			
Principal Place of Business 207 ROSIER ROAD P O BOX 1684 BRANDON FL 33509-1684 US		Mailing Address 207 ROSIER ROAD P O BOX 1684 BRANDON FL 33509-1684 US	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-2724159		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		1st MOORE CR2E037 (10/05)	
6. Name and Address of Current Registered Agent SHANNON, RICHARD J. 713 ISLETON DR BRANDON FL 33511		7. Name and Address of New Registered Agent Name Shannon, Richard J Street Address (P.O. Box Number is Not Acceptable) 1426 Emerald Hill Way City Valrico FL Zip Code 33594	
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 ADDRESS CHANGE ONLY (SIGNATURE BELOW)		DATE 4/16/06	
Signature, typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when re-registering)	
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PD	NAME SHANNON, RICHARD J.	STREET ADDRESS 713 ISLETON DR	CITY-ST-ZIP BRANDON FL 33511
		<input type="checkbox"/> Delete	
TITLE TD	NAME SPRADLING, TRENTON L.	STREET ADDRESS 2110 JOHN MOORE RD.	CITY-ST-ZIP BRANDON FL 33511
		<input type="checkbox"/> Delete	
TITLE SD	NAME SHANNON, ELIZABETH T.	STREET ADDRESS 713 ISLETON DR	CITY-ST-ZIP BRANDON FL 33511
		<input type="checkbox"/> Delete	
TITLE PD	NAME Shannon, Richard J	STREET ADDRESS 1426 Emerald Hill Way	CITY-ST-ZIP Valrico FL 33594
		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE TD	NAME Spradling, Trenton L.	STREET ADDRESS 2110 John Moore Dr.	CITY-ST-ZIP Brandon FL 33511
		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE SD	NAME Shannon, Elizabeth T.	STREET ADDRESS 1426 Emerald Hill Way	CITY-ST-ZIP Valrico FL 33594
		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
		<input 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 Section 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: *Richard J. Shannon* RICHARD J. SHANNON 4/16/06 815-681-5444