

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20469

FILED  
Jan 19, 2007  
Secretary of State

Entity Name: FELLOWSHIP OF CHRISTIAN ATHLETES, INC.

**Current Principal Place of Business:**

8701 LEEDS RD.  
KANSAS CITY, MO 64129

**New Principal Place of Business:**

**Current Mailing Address:**

8701 LEEDS RD.  
KANSAS CITY, MO 64129

**New Mailing Address:**

FEI Number: 44-0610626      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CORPROATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS RD # 221E  
PALM BEACH GARDENS, FL 33410 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: C ( ) Delete  
Name: PRICE, NELSON L DR  
Address: 774 ROSWELL STREET  
City-St-Zip: MARIETTA, GA 30060

Title: VC ( ) Delete  
Name: EXUM, FRED  
Address: ONE UNION SQUARE  
City-St-Zip: CHATTANOOGA, TN 37402 US

Title: PRES ( ) Delete  
Name: STECKEL, LES  
Address: 8701 LEEDS RD.  
City-St-Zip: KANSAS CITY, MO 64129

Title: TR ( ) Delete  
Name: OWEN, JOE  
Address: 1930 W. HUGUENOT ROAD  
City-St-Zip: RICHMOND, VA 23235 US

Title: D ( ) Delete  
Name: ALBRIGHT, JANE  
Address: 1845 FAIRMONT  
City-St-Zip: WICHITA, KS 67260

Title: S ( ) Delete  
Name: FANARA, BARBARA  
Address: 621 NE LAKE POINTE DRIVE  
City-St-Zip: LEE'S SUMMIT, MO 64064 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: C (X) Change ( ) Addition  
Name: MCCABE, JAMES B  
Address: 5200 BUFFINGTON ROAD  
City-St-Zip: ATLANTA, GA 30349

Title: VC (X) Change ( ) Addition  
Name: EXUM, FRED  
Address: ONE UNION SQUARE  
City-St-Zip: CHATTANOOGA, TN 37402

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: GREG B. LAM

A

01/19/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date