

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003422

FILED
Feb 14, 2008
Secretary of State

Entity Name: AWANA CLUBS INTERNATIONAL, INCORPORATED

Current Principal Place of Business:

ONE EAST BODE RD.
STREAMWOOD, IL 601076658

New Principal Place of Business:

Current Mailing Address:

ONE EAST BODE RD.
STREAMWOOD, IL 601076658

New Mailing Address:

FEI Number: 36-2428692

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEXIS DOCUMENT SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: CEO () Delete
Name: EGGAR, JACK D
Address: 1 E BODE RD
City-St-Zip: STREAMWOOD, IL 60107

Title: DIR () Delete
Name: DAVE, BILHORN
Address: 652 HWY 73
City-St-Zip: EDGERTON, WI 53534

Title: T () Delete
Name: SYL, CHODY
Address: 2568 CLARKE
City-St-Zip: RIVER GROVE, IL 60171

Title: DIR () Delete
Name: FRANZ, VIC
Address: 1N639 AUGUSTA CT
City-St-Zip: WINFIELD, IL 60190

Title: DIR () Delete
Name: JENSEN, JIM
Address: 9426 GEORGETOWN
City-St-Zip: CRYSTAL LAKE, IL 60014

Title: DIR () Delete
Name: KLIPPERT, TOM
Address: 86 E. ARMITAGE
City-St-Zip: GLENDALE HEIGHTS, IL 60139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: SWANSON, DAVID H
Address: 1 E BODE RD
City-St-Zip: STREAMWOOD, IL 60107

Title: T (X) Change () Addition
Name: CHODY, SYLVESTER J
Address: 1 E BODE RD
City-St-Zip: STREAMWOOD, IL 60107

Title: DIR (X) Change () Addition
Name: FRANZ, VICTOR
Address: 1 E BODE RD
City-St-Zip: STREAMWOOD, IL 60107

Title: DIR (X) Change () Addition
Name: JENSEN, JIM C JR
Address: 1 E BODE RD
City-St-Zip: STREAMWOOD, IL 60107

Title: DIR (X) Change () Addition
Name: KLIPPERT, TOM
Address: 1 E BODE RD
City-St-Zip: STREAMWOOD, IL 60107

I hereby certify that the information supplied with this filing does not qualify 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: JACK D. EGGAR

CEO

02/14/2008

Electronic Signature of Signing Officer or Director

Date