

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 23, 2008
Secretary of State

DOCUMENT# N99000003949

Entity Name: GREAT COMMISSION FOUNDATION, INC.

Current Principal Place of Business:

4720 CLEVELAND HEIGHTS BLVD.
SUITE 303
LAKELAND, FL 33813

New Principal Place of Business:

Current Mailing Address:

4720 CLEVELAND HEIGHTS BLVD.
SUITE 303
LAKELAND, FL 33813

New Mailing Address:

FEI Number: 59-3649265 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DENNIS, LARRY D
4720 CLEVELAND HEIGHTS BLVD.
SUITE 303
LAKELAND, FL 33813 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: PD () Delete
Name: SMITH, DONALD M
Address: 651 BARNES AVE.
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: VPD () Delete
Name: DAVIS, CHARLES
Address: 427 RUBY LAKE PL.
City-St-Zip: WINTER HAVEN, FL 33884 US

Title: STD () Delete
Name: WILLIAMS, BRENT
Address: 288 CRYSTAL GROVE BLVD.
City-St-Zip: LUTZ, FL 33548 US

Title: D () Delete
Name: LEONARD, LARRY W
Address: 4777 LAKELAND HIGHLANDS ROAD
City-St-Zip: LAKELAND, FL 33813

Title: D () Delete
Name: DENNIS, LARRY D
Address: 4720 CLEVELAND HGTS BLVD., SUITE 303
City-St-Zip: LAKELAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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

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: BRENT WILLIAMS

S

05/23/2008

Electronic Signature of Signing Officer or Director

_____ Date