

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 05, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # 700663**

1. Entity Name

ATLANTIC CHRISTIAN FUND INCORPORATED



Principal Place of Business

850 BEVILLE ROAD  
DAYTONA BEACH FL 32114

Mailing Address

850 BEVILLE ROAD  
DAYTONA BEACH FL 32114



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-1004175

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOODWIN, TED  
6236 POPLAR GROVE DR  
PORT ORANGE FL 32127

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$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 VD ☐ Delete  
NAME WADE, GARY  
STREET ADDRESS 885 PINEAPPLE RD  
CITY-ST-ZIP SOUTH DAYTONA FL 32120

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS U000000656272  
CITY-ST-ZIP 03/14/07-80019-002 61.25

TITLE PD ☐ Delete  
NAME WILLIAMS, JACK  
STREET ADDRESS 6116 DEL RIO DR  
CITY-ST-ZIP PORT ORANGE FL 32127

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME WOODHAM, PHILIP  
STREET ADDRESS 1712 CALDWELL RD  
CITY-ST-ZIP SOUTH DAYTONA FL 32119

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME HENRY, RAY  
STREET ADDRESS 116 PALM DR  
CITY-ST-ZIP DAYTONA BEACH FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TD ☐ Delete  
NAME GOODWIN, TED  
STREET ADDRESS 6236 POPLAR GROVE DR  
CITY-ST-ZIP PORT ORANGE FL 32127

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SD ☐ Delete  
NAME GRIFFEY, CHARLES  
STREET ADDRESS 1709 ORANGE TREE DR  
CITY-ST-ZIP EDGEWATER FL 32132

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Ted Goodwin* TED GOODWIN

2/26/07 322-8226