2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2011
Secretary of State

DOCUMENT# 708057

Entity Name: CHILD EVANGELISM FELLOWSHIP OF NORTH CENTRAL FLORIDA, INC.

Current Principal Place of Business:

2615 NW 6TH STREET
SUITE# E
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

2615 NW 6TH STREET, SUITE# E
GAINESVILLE, FL 32609

New Mailing Address:

2615 NW 6TH STREET
SUITE# E
GAINESVILLE, FL 32609

FEI Number: 59-1000180 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARLSON, N. STEVEN
2615 NW 6TH STREET
SUITE #E
GAINESVILLE, FL 32609 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: CD
Name: SUMMERLIN, STEVE
Address: 4014 NW 15TH STREET
City-St-Zip: GAINESVILLE, FL 32605

Title: TD
Name: THOMAS, ROBERT
Address: 4509 NE 18 TRAIL
City-St-Zip: TRENTON, FL 32693

Title: SD
Name: MELCHOIR, JUANITA S
Address: 10251 NE 92ND PLACE
City-St-Zip: BRONSON, FL 32621

Title: VD
Name: BLAKELY, TROY
Address: 152 NW SEMINARY AVE
City-St-Zip: MICANOPY, FL 32667

Title: D
Name: AMBURGEY, P. J
Address: 14971 NE 145TH AVENUE
City-St-Zip: WALDO, FL 32694

I hereby 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 all other like empowered.

SIGNATURE: N STEVEN CARLSON RA 03/14/2011

Electronic Signature of Signing Officer or Director — Date