

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712473

FILED
Feb 22, 2010
Secretary of State

Entity Name: THE CHRISTIAN AND MISSIONARY ALLIANCE FOUNDATION, INC.

Current Principal Place of Business:

C/O SHELL POINT VILLAGE
15000 SHELL POINT BLVD. STE 100
FT. MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

C/O SHELL POINT VILLAGE
15000 SHELL POINT BLVD. STE 100
FT. MYERS, FL 33908

New Mailing Address:

FEI Number: 59-1166437

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DYS, PETER
15000 SHELL POINT BLVD
FORT MYERS, FL 33908 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: TD
Name: DAVIDSON, JOHN W
Address: 128 WESTRIDGE COURT
City-St-Zip: CHAPIN, SC 29036

Title: CD
Name: EASTMAN, RONALD
Address: 1200 MISTLETOE COURT
City-St-Zip: MARCO ISLAND, FL 34145

Title: SD
Name: DEWITT, CHARLES B REV
Address: 528 COUNTY ROAD 513
City-St-Zip: CALIFON, NJ 07830

Title: ASD
Name: DYS, PETER
Address: 14731 FAIR HAVEN RD
City-St-Zip: FORT MYERS, FL 33908

Title: AT
Name: LOCHRIDGE, TIM L
Address: 11078 SIERRA PALM COURT
City-St-Zip: FORT MYERS, FL 33912

Title: VCD
Name: DUSS, DONNA J
Address: 5608 GOVERNOR'S POND CIRCLE
City-St-Zip: ALEXANDRIA, VA 22310

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: TIM K. LOCHRIDGE

AT

02/22/2010

Electronic Signature of Signing Officer or Director

Date