

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 727818

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Entity Name:** THE CHRISTIAN FELLOWSHIP OF BROOKSVILLE, INC.

**Current Principal Place of Business:**

7391 LYKES DUBLIN RD  
BROOKSVILLE, FL 34601 US

**New Principal Place of Business:**

**Current Mailing Address:**

7391 LYKES DUBLIN RD  
BROOKSVILLE, FL 34601 US

**New Mailing Address:**

**FEI Number:** 59-2304450

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROBERTS, JAMES E SR  
7391 LYKES DUBLIN RD  
BROOKSVILLE, FL 34601 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: VD  
Name: EDDIE ROBERTS JR.  
Address: 11360 PAOLI CT.  
City-St-Zip: BROOKSVILLE, FL 34614 US

Title: STD  
Name: JACKSON, ROSSO  
Address: 13119 TAFT ST.  
City-St-Zip: BROOKSVILLE, FL

Title: PD  
Name: ROBERTS, JAMES E.  
Address: 7391 LYKES DUBLIN RD  
City-St-Zip: BROOKSVILLE, FL

Title: S  
Name: ROBERTS, JASON  
Address: 7401 LYKES DUBLIN ROAD  
City-St-Zip: BROOKSVILLE, FL 34601

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: JAMES E. ROBERTS SR.

PD

04/26/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date