

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731564

FILED
Mar 25, 2009
Secretary of State

Entity Name: CHRISTIAN FELLOWSHIP INC.

Current Principal Place of Business:

10931 SW 31 STREET
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

10931 SW 31 STREET
DAVIE, FL 33328

New Mailing Address:

FEI Number: 59-1541226

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZOPPELT, ANDREW
10931 SW 31 STREET
DAVIE, FL 33328 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: PDC () Delete
Name: ZOPPELT, ANDREW
Address: 10931 SW 31 STREET
City-St-Zip: DAVIE, FL 33328

Title: STD () Delete
Name: ZOPPELT, CELINE
Address: 10931 SW 31 STREET
City-St-Zip: DAVIE, FL 33328

Title: D () Delete
Name: FLANIGAN, RUSSELL
Address: 10931 SW 31 STREET
City-St-Zip: DAVIE, FL 33328

Title: D () Delete
Name: SCHROT, WILLIAM
Address: 321 FLORIDA AVE
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: D () Delete
Name: MCBRIDE, WILLIAM
Address: 11 REDWOOD CIRCLE
City-St-Zip: PLANTATION, FL 33319

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: ANDREW ZOPPELT

PDC

03/25/2009

Electronic Signature of Signing Officer or Director

Date