

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731826

FILED
Jan 04, 2012
Secretary of State

Entity Name: CHRISTIAN FELLOWSHIP TEMPLE, INC.

Current Principal Place of Business:

251 OHIO AVENUE WEST
MACCLENNY, FL 32063

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1525
MACCLENNY, FL 32063

New Mailing Address:

FEI Number: 59-2165531

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIRKLAND, GRANVEL S.
5 WEST MACCLENNY AVE.
MACCLENNY, FL 32063 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: THOMAS, TIMOTHY
Address: 6133 COPPER RIDGE CIRCLE
City-St-Zip: MACCLENNY, FL 32063

Title: PD
Name: THOMAS, DAVID
Address: 1323 COPPER OAKS CT
City-St-Zip: MACCLENNY, FL 32063

Title: S
Name: REGISTER, JIM B
Address: 1360 TURNER CEMETARY RD
City-St-Zip: SANDERSON, FL 32087

Title: TD
Name: GAINEY, BEVERLY
Address: 4204 DOGWOOD ST
City-St-Zip: MACCLENNY, FL 32063

Title: D
Name: CREWS, RAYMOND LEWIS
Address: 653 KATIE COURT
City-St-Zip: MACCLENNY, FL 32063

Title: D
Name: RICHARDSON, JOHNNY
Address: 13008 MUD LAKE RD.
City-St-Zip: GLEN SAINT MARY, FL 32040

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: DAVID PAUL THOMAS

PD

01/04/2012

Electronic Signature of Signing Officer or Director

Date