

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 31, 2009
Secretary of State**

DOCUMENT# 735624

Entity Name: THE CHRISTIAN LIGHT FOUNDATION, INC.

Current Principal Place of Business:

8921 BAYMEADOWS WAY
STE 3
JACKSONVILLE, FL 32256 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 23881
JACKSONVILLE, FL 322416881 US

New Mailing Address:

FEI Number: 59-1747173 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUMMINGS, JACK K
8153 SAN RAFAEL DR
JACKSONVILLE, FL 32217 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 () Delete
Name: LEWIS, TED
Address: 1867 HOLLY OAKS RAVINE DR
City-St-Zip: JACKSONVILLE, FL 32225

Title: D () Delete
Name: GOUCH, SR D A
Address: 4214 BLANDING BLVD
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: PALMER, ERNIE
Address: 1250 HERON POOINT RD
City-St-Zip: JACKSONVILLE, FL 32223

Title: DV () Delete
Name: NILL, C. JOHN
Address: 8144 FIRST COAST HWY #102
City-St-Zip: AMELIA ISLAND, FL 32034

Title: D () Delete
Name: WIDDOWSON, WALTER L
Address: 5660 SWAMP FOX RD
City-St-Zip: JACKSONVILLE, FL 32210

Title: SD () Delete
Name: DARLEY, CARL W
Address: 5158 CAMELLIA CIR S
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LEWIS, TED
Address: 1867 HOLLY OAKS RAVINE DR
City-St-Zip: JACKSONVILLE, FL 32225

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: CD (X) Change () Addition
Name: DARLEY, CARL W
Address: 5158 CAMELLIA CIR S
City-St-Zip: JACKSONVILLE, FL 32207

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: JACK K CUMMINGS

EXDI

03/31/2009

Electronic Signature of Signing Officer or Director

_____ Date