2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#752803

FILED Apr 26, 2008 Secretary of State

Entity Name: CHRISTIAN ENDOWMENT FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 35849 CR 439 40438 BRIDLE PATH LANE EUSTIS, FL 32736 LEESBURG, FL 34788 US **Current Mailing Address: New Mailing Address:** P.O. BOX 1387 EUSTIS, FL 32727 US FEI Number: 59-2093912 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DORMAN, PETER T DORMAN, PETER T 40438 BRÍDLE PATH LANE 35849 CR 439 EUSTIS, FL 32726 LEESBURG, FL 34788 US 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: 04/26/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MAFFETT, DAN Name: Name: Address: 2187 COUNTRY SIDE CIR SOUTH Address: City-St-Zip: ORLANDO, FL City-St-Zip: Title: Title: () Delete () Change () Addition GILSTRAP, LA Name: Name: Address: 3012 MERCY DR Address: City-St-Zip: ORLANDO, FL City-St-Zip: Title: SDT () Delete Title: () Change () Addition SHILLING, MARCIA Name: Name: 1898 TURNBERRY TERR Address: Address: City-St-Zip: ORLANDO, FL City-St-Zip: Title: MD () Delete Title: MD (X) Change () Addition Name: DORMAN, PETER T Name: DORMAN, PETER T 40438 BRIDLE PATH LANE Address: 35849 CR 439 Address: City-St-Zip: EUSTIS, FL City-St-Zip: LEESBURG, FL 34788

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: PETER T. DORMAN RΑ 04/26/2008