

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 15, 2012
Secretary of State

DOCUMENT# 756076

Entity Name: CHRISTIANVILLE FOUNDATION INC.**Current Principal Place of Business:**5220 RIVER PARK VILLAS DRIVE
ST. AUGUSTINE, FL 32092 US**New Principal Place of Business:**265 EAST RIVER ROAD
EAST PALATKA, FL 32131 US**Current Mailing Address:**P.O. BOX 24598
JACKSONVILLE, FL 32241 US**New Mailing Address:**265 EAST RIVER ROAD
EAST PALATKA, FL 32131 US**FEI Number:** 98-0049674**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**COWEN, ROSS W
5220 RIVER PARK VILLA DRIVE
ST. AUGUSTINE,, FL 32092 US**Name and Address of New Registered Agent:**GSTOHL, GENE
265 EAST RIVER ROAD
EAST PALATKA, FL 32131 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: GENE GSTHOL

08/15/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: LIBERATOR, JIM
Address: 31762 LAKE ROAD
City-St-Zip: AVON LAKE, OH 44012 US

Title: VP
Name: REDDEN, EDESEL COWEN
Address: 3460 RED CLOUD TRAIL
City-St-Zip: ST. AUGUSTINE, FL 32086 US

Title: D
Name: BROOKS, CLIFF
Address: 4361 CRETE COVE
City-St-Zip: NICEVILLE, FL 32578 US

Title: D
Name: REDDEN, ELMER
Address: 133 PRIMEROSE LANE
City-St-Zip: BECKLEY, WV 25801 US

Title: DT
Name: GSTHOL, GENE
Address: 265 EAST RIVER ROAD
City-St-Zip: EAST PALATKA, FL 32131 US

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: GENE GSTHOL

DT

08/15/2012

Electronic Signature of Signing Officer or Director

Date