

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 756494

**FILED**  
**Mar 08, 2010**  
**Secretary of State**

**Entity Name:** AMBASSADORS FOR CHRIST, INCORPORATED

**Current Principal Place of Business:**

750 W 9TH ST  
SANFORD, FL 32771

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1553  
SANFORD, FL 32772

**New Mailing Address:**

**FEI Number:** 59-2768344

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

STIVER, BOBBIE WHITTED  
750 W 9TH STREET  
SANFORD, FL 32771 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: D  
Name: STIVER, BOBBIE  
Address: 201 RAMBELWOOD DR.  
City-St-Zip: SANFORD, FL 32773

Title: OD  
Name: DEBOSE, GWENDOLYN  
Address: 206 MARGARITA RD  
City-St-Zip: DEBARY, FL 32713

Title: OD  
Name: BARBARA, BROWNE  
Address: 1018 OLIVE AVE  
City-St-Zip: SANFORD, FL 32771

Title: D  
Name: ELLA, WOODARD  
Address: 1018 JESAMINE AVE  
City-St-Zip: SANFORD, FL 32771

Title: OD  
Name: CHURCH, BLANCHE  
Address: 932 HICKORY BEND RD  
City-St-Zip: ATLANTA, GA 30349

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: BOBBIE STIVER

D

03/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date