

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 10, 2007 08:00 AM
Secretary of State

DOCUMENT # 770544

1. Entity Name
CHRIST CENTER FELLOWSHIP, INC.



Principal Place of Business
**2130 HIGHVIEW RD.
BRANDON, FL 33510-2003**

Mailing Address
**2130 HIGHVIEW RD.
BRANDON, FL 33510-2003**

DO NOT WRITE IN THIS SPACE



01032007 No Chg-NP CR2E037 (4/06)

4. FEI Number
59-2330632

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**JONES, TERRY H.
2310 HIGHVIEW ROAD
BRANDON, FL 33511**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

000000581600
01/10/07-80094-008 61.25

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
JONES, TERRY H.
1725 HAPPY ACRES LN
VALRICO, FL 33594**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
MCCLENDON, DENNIS
865 BAYOU VIEW DR.
BRANDON, FL 33510**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
HOENING, CHUCK
402 BAYFIELD DR.
BRANDON, FL 33510**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Terry H. Jones Terry H. Jones 8 Jan 07 (813) 685-5888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #