

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 831278

FILED
Mar 14, 2008
Secretary of State

Entity Name: CAMPUS CRUSADE FOR CHRIST, INC.

Current Principal Place of Business:

ATTN: GENERAL COUNSEL'S OFFICE
100 LAKE HART DRIVE 3500
ORLANDO, FL 32832 US

New Principal Place of Business:

Current Mailing Address:

ATTN: GENERAL COUNSEL'S OFFICE
100 LAKE HART DRIVE 3500
ORLANDO, FL 32832 US

New Mailing Address:

FEI Number: 95-6006173

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: V () Delete
Name: BRUEHL, J R
Address: 100 LAKE HART DRIVE-2100
City-St-Zip: ORLANDO, FL 32832

Title: TD () Delete
Name: BUNNER, BRUCE A
Address: 1319 N NEW YORK AVENUE
City-St-Zip: WINTER PARK, FL 32789 25

Title: D () Delete
Name: BRIGHT, VONETTE A
Address: 100 LAKE HART DRIVE-2100
City-St-Zip: ORLANDO, FL 32832

Title: PCD () Delete
Name: DOUGLASS, STEPHEN B
Address: 100 LAKE HART DRIVE-2100
City-St-Zip: ORLANDO, FL 32832

Title: S () Delete
Name: HAUER, SALLY E
Address: 100 LAKE HART DRIVE 3500
City-St-Zip: ORLANDO, FL 32832

Title: D () Delete
Name: ARMSTRONG, WILLIAM L
Address: 8787 W. ALAMEDA AVE
City-St-Zip: LAKEWOOD, CO 80226

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: BUNNER, BRUCE A
Address: 1319 N NEW YORK AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: D (X) Change () Addition
Name: BRIGHT, VONETTE Z
Address: 100 LAKE HART DRIVE-2100
City-St-Zip: ORLANDO, FL 32832

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SALLY E. HAUER

SEC

03/14/2008

Electronic Signature of Signing Officer or Director

_____ Date