

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 839510

FILED
Apr 28, 2008
Secretary of State

Entity Name: BILLY GRAHAM EVANGELISTIC ASSOCIATION

Current Principal Place of Business:

1 BILLY GRAHAM PARKWAY
CHARLOTTE, NC 282010001

New Principal Place of Business:

1 BILLY GRAHAM PARKWAY
CHARLOTTE, NC 28201

Current Mailing Address:

1 BILLY GRAHAM PARKWAY
CHARLOTTE, NC 282010001

New Mailing Address:

FEI Number: 41-0692230 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS RD #221E
PALM BEACH GARDENS, FL 33410 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: CEO () Delete
Name: GRAHAM, FRANKLIN
Address: 1 BILLY GRAHAM PARKWAY
City-St-Zip: CHARLOTTE, NC 28201

Title: COO () Delete
Name: SABER, PAUL T
Address: 1 BILLY GRAHAM PARKWAY
City-St-Zip: CHARLOTTE, NC 28201

Title: S () Delete
Name: AARSVOLD, JOEL B
Address: 1 BILLY GRAHAM PARKWAY
City-St-Zip: CHARLOTTE, NC 28201

Title: D () Delete
Name: BRUCE, DAVID P
Address: 155 ASSEMBLY DRIVE
City-St-Zip: MONTREAT, NC 28757

Title: D () Delete
Name: CAPEN, JR, RICHARD G
Address: 1 BILLY GRAHAM PARKWAY
City-St-Zip: CHARLOTTE, NC 28201

Title: D () Delete
Name: CHEATHAM, DR, MELVIN
Address: 244 BARNARD WAY
City-St-Zip: VENTURA, CA 93001

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JOEL B. AARSVOLD

SECR

04/28/2008

Electronic Signature of Signing Officer or Director

Date