

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 28, 2008
Secretary of State

DOCUMENT# F02000001597

Entity Name: RESTORATION CHRISTIAN FELLOWSHIP, INCORPORATED**Current Principal Place of Business:**1136 PLANT ST, SUITE 100
WINTER GARDEN, FL 34787**New Principal Place of Business:****Current Mailing Address:**8235 CHATHAM POINTE CT.
ORLANDO, FL 32535**New Mailing Address:****FEI Number:** 11-2978832**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROUTIE, RICHARD
8235 CHATHAM POINTE COURT
ORLANDO, FL 32835 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: CP () Delete
Name: ROUTIE, RICHARD
Address: 8235 CHATHAM POINTE COURT
City-St-Zip: ORLANDO, FL 32835

Title: DS () Delete
Name: BROWN, NICOLE
Address: 83-19 CORNISH AVE.
City-St-Zip: ELMHURST, NY 11373

Title: DT () Delete
Name: PRINCE, NICOLE
Address: 105-45 133RD ST.
City-St-Zip: RICHMOND HILL, NY 11419

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DS (X) Change () Addition
Name: GUSTARD, DIANE
Address: PO BOX 656856
City-St-Zip: FRESH MEADOWS, NY 11365

Title: DT (X) Change () Addition
Name: JANET, HOBBS
Address: PO BOX 656856
City-St-Zip: FRESH MEADOWS, NY 11365

Title: D () Change (X) Addition
Name: ARISAH, ANDERSON
Address: 8235 CHATHAM POINTE COURT
City-St-Zip: ORLANDO, FL 32835

Title: D () Change (X) Addition
Name: NICOLE, PRINCE
Address: PO BOX 656856
City-St-Zip: FRESH MEADOWS, NY 11365

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: RICHARD ROUTIE

CP

05/28/2008

Electronic Signature of Signing Officer or Director

Date