

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 28, 2009
Secretary of State

DOCUMENT# F04000000183

Entity Name: THE GREAT COMMISSION FOUNDATION OF CAMPUS CRUSADE FOR CHRIST, INC.**Current Principal Place of Business:**100 LAKE HART DRIVE #3600
ORLANDO, FL 32832**New Principal Place of Business:**100 LAKE HART DRIVE MC -3500
ORLANDO, FL 32832**Current Mailing Address:**100 LAKE HART DRIVE #3500
ATTN: GENERAL COUNSEL'S OFFICE
ORLANDO, FL 32832**New Mailing Address:****FEI Number:** 95-2814920**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HODGES, HEIDI
100 LAKE HART DR. #3600
ORLANDO, FL 32832 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: P () Delete
Name: WEAR, JERRY J
Address: 100 LAKE HART DRIVE #3600
City-St-Zip: ORLANDO, FL 32832

Title: CD () Delete
Name: BUNNER, BRUCE
Address: 1319 N. NEW YORK AVE
City-St-Zip: WINTER PARK, FL 32789

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

Title: T () Delete
Name: TJERNAGEL, MARK
Address: 100 LAKE HART DRIVE #3900
City-St-Zip: ORLANDO, FL 32832

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

Title: D () Delete
Name: SELLERS, STEVEN C
Address: 100 LAKE HART DRIVE #2100
City-St-Zip: ORLANDO, FL 32832

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SEC (X) Change () Addition
Name: HAUER, SALLY E
Address: 100 LAKE HART DRIVE #3500
City-St-Zip: ORLANDO, FL 32832

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

Title: D (X) Change () Addition
Name: CANNADA, R. BARRY
Address: P.O. BOX 22567
City-St-Zip: JACKSON, MS 39225

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

05/28/2009

Electronic Signature of Signing Officer or Director

Date