

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90164 028 ****61.25

DOCUMENT # F07000003531 1. Entity Name CHRISTIAN PHARMACISTS FELLOWSHIP INTERNATIONAL, INC.			
Principal Place of Business 900 SOUTH OLIVE AVENUE WEST PALM BEACH, FL 33401		Mailing Address PO BOX 24708 WEST PALM BEACH, FL 33416-4708	
2. Principal Place of Business - No P.O. Box # <u>1314 South Dixie Highway</u>		3. Mailing Address Suite, Apt. # etc	
City & State <u>West Palm Beach</u>		City & State _____	
Zip <u>33401-6410</u>		Country <u>USA</u>	
4. HEI Number <u>52-1419500</u>		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HUDSON, JENNIFER 900 SOUTH OLIVE AVENUE WEST PALM BEACH, FL 33401		7. Name and Address of New Registered Agent Name <u>NENA LINDROSE</u> Street Address (P.O. Box Number is Not Acceptable) <u>1314 South Dixie Highway</u> City <u>West Palm Beach</u> FL <u>33401-6410</u>	
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. SIGNATURE <u>Nena Lindrose</u> <u>NENA LINDROSE Administrative Assistant</u> <u>4/25/08</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE P NAME HAMES, HERBERT STREET ADDRESS 672 OLD FRIARS RD CITY-STATE-ZIP COLUMBIA, SC 29210 - <u>3723</u>	☐ Delete	☐ Change ☐ Addition	
TITLE E NAME ECKEL, FRED STREET ADDRESS 109 CHURCH STREET CITY-STATE-ZIP CHAPEL HILL, NC 27516	☐ Delete	☐ Change ☐ Addition	
TITLE VP NAME CARLSON, GREGORY STREET ADDRESS 4137 TUDOR ORCHARD ROAD CITY-STATE-ZIP STUART, VA 24171 - <u>3087</u>	☐ Delete	☐ Change ☐ Addition	
TITLE S NAME DE BONI, LUIGI STREET ADDRESS PO BOX 5146 CITY-STATE-ZIP PRINCETON, WV 24740	☒ Delete	☐ Change ☒ Addition	Secretary <u>John Pitt Phillips</u> <u>5227 Doe Meadow Court</u> <u>Crouse, NC 28033-7744</u>
TITLE D NAME SPADARO, DANIEL STREET ADDRESS 13507 EAGLE HAWK DR CITY-STATE-ZIP LITTLE ROCK, AR 72206	☒ Delete	☐ Change ☒ Addition	Treasurer <u>Wayne Rinehart</u> <u>10702 Chestnut Hills Drive</u> <u>Matthews NC 28105-7600</u>
TITLE D NAME ALLHANDS, KEITH STREET ADDRESS 22 BEAR BRANCH RD CITY-STATE-ZIP DILLSBORO, IN 47018	☐ Delete	☐ Change ☐ Addition	
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: <u>Herbert J. Hames</u> SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: <u>4-21-08</u> <u>803-772-4636</u> Daytime Phone #	

Herbert J. HAMES, President, CPFI