2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2008
Secretary of State

DOCUMENT# F93000001956

Entity Name: CHRISTOPHER EDWARDS FOUNDATION, INC.

Current Principal Place of Business:

98 CHURCH STREET
CHARLESTON, SC 29401 US

New Principal Place of Business:

Current Mailing Address:

98 CHURCH STREET
CHARLESTON, SC 29401 US

New Mailing Address:

FEI Number: 58-7701430 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RONALD BLUE & CO., LLC
1900 SUMMIT TOWER BOULEVARD
260
ORLANDO, FL 32810 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:	DCVT	( ) Delete
Name:	EDWARDS, SARA M	
Address:	98 CHURCH STREET	
City-St-Zip:	CHARLESTON, SC 29401	
Title:	D	( ) Delete
Name:	HARRIS, SHARON	
Address:	858 HORSECOVE ROAD	
City-St-Zip:	HIGHLANDS, NC 28741	
Title:	SD	( ) Delete
Name:	JULIE TIDWELL,	
Address:	8623 LAKE FORREST DRIVE.	
City-St-Zip:	DOUGLASVILLE, GA 30134	
Title:	MGRM	( ) Delete
Name:	EDWARDS, DAVID	
Address:	2358 RIVERSIDE AVE, # 706	
City-St-Zip:	JACKSONVILLE, FL 32204	
Title:	MGRM	( ) Delete
Name:	EDWARDS, THOMAS M	
Address:	721 HIGH BETTERY CIRCLE	
City-St-Zip:	MOUNT PLEASANT, SC 29464	
Title:	M	( ) Delete
Name:	HARBIN, CATHY	
Address:	PO BOX 15567	
City-St-Zip:	FERNANDINA BEACH, FL 32035	

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: SARA M EDWARDS DCVT 02/01/2008

Electronic Signature of Signing Officer or Director — Date