

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006107

FILED
Apr 28, 2009
Secretary of State

Entity Name: ASSOCIATION OF CHRISTIAN THRIFT STORES, INC.

Current Principal Place of Business:

112 W CERVANTES ST
PENSACOLA, FL 32501

New Principal Place of Business:

1585 E. BLOUNT ST
PENSACOLA, FL 32503

Current Mailing Address:

PO BOX 870
PENSACOLA, FL 32591

New Mailing Address:

PO BOX 12157
PENSACOLA, FL 32591

FEI Number: 59-3700978

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEUCHTMAN, GARY B
3 W GARDEN ST
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

GRAY, LEO E
1260 TALL PINE TRAIL
GULF BREEZE, FL 32561 US

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: LEO GRAY

04/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GRAY, LEO
Address: 112 W CERVANTES ST
City-St-Zip: PENSACOLA, FL 32501

Title: STD () Delete
Name: PIPKINS, DANNY
Address: 112 W CERVANTES ST
City-St-Zip: PENSACOLA, FL 32594

Title: D () Delete
Name: WEST, TROY
Address: 125 SOUTH HARRISON AVE
City-St-Zip: OXNARD, CA 93030

Title: D () Delete
Name: CLARK, KENT
Address: 35 E HURON ST
City-St-Zip: PONTIAC, MI 48342

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change () Addition
Name: GRAY, ED
Address: 1585 E. BLOUNT ST.
City-St-Zip: PENSACOLA, FL 32503

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: LEO GRAY

PD

04/28/2009

Electronic Signature of Signing Officer or Director

Date