

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001926

FILED
Apr 26, 2004
Secretary of State**Entity Name:** CROWN THE KING CHRISTIAN FELLOWSHIP, INC.**Current Principal Place of Business:**5273 CRUMP RD.
TALLAHASSEE, FL 32309**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 16131
TALLAHASSEE, FL 32309**New Mailing Address:****FEI Number:** 03-0406845**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PEMBERTON, ERNESTINE W
5273 CRUMP RD.
TALLAHASSEE, FL 32309**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: D () Delete
Name: PEMBERTON, ERNESTINE W
Address: 5273 CRUMP RD.
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: PEMBERTON, PAUL E
Address: 5273 CRUMP RD.
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: DORSEY, CHARLETTA M
Address: 8617 HOWELL DR.
City-St-Zip: JACKSONVILLE, FL 32208

Title: D (X) Delete
Name: WARREN, DARRIN
Address: 2363 IAN DR.
City-St-Zip: TALLAHASSEE, FL 32303

Title: PT () Delete
Name: PEMBERTONISE, ERNESTINE W
Address: 5273 CRUMP ROAD
City-St-Zip: TALLAHASSEE, FL 32309

Title: T () Delete
Name: PAUL, DORSEY L
Address: 861 T. HOWELL DRIVE
City-St-Zip: JACKSONVILLE, FL 32208

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: PT (X) Change () Addition
Name: PEMBERTON, ERNESTINE W
Address: 5273 CRUMP ROAD
City-St-Zip: TALLAHASSEE, FL 32309

Title: D (X) Change () Addition
Name: PAUL, DORSEY L
Address: 8617 HOWELL DRIVE
City-St-Zip: JACKSONVILLE, FL 32208

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ERNESTINE W. PEMBERTON

PT

04/26/2004

Electronic Signature of Signing Officer or Director

Date