

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001951

FILED  
Jun 11, 2007  
Secretary of State

**Entity Name:** CORNERSTONE FAMILY FELLOWSHIP, INC.

**Current Principal Place of Business:**

122 AIRPORT ROAD  
PANAMA CITY, FL 32405

**New Principal Place of Business:**

**Current Mailing Address:**

122 AIRPORT ROAD  
PANAMA CITY, FL 32405

**New Mailing Address:**

**FEI Number:** 86-1050720 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

ALDRIDGE, GREG  
2427 PELICAN BAY COURT  
PANAMA CITY BEACH, FL 32408 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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ALDRIDGE, GREG  
Address: P.O. BOX 27583  
City-St-Zip: PANAMA CITY BEACH, FL 32411

Title: VD ( ) Delete  
Name: ALDRIDGE, JAMES  
Address: P.O. BOX 1251  
City-St-Zip: AMERICUS, GA 31709

Title: D ( ) Delete  
Name: ALDRIDGE, LECIA  
Address: P.O. BOX 27583  
City-St-Zip: PANAMA CITY BEACH, FL 32411

Title: STD ( ) Delete  
Name: WESTERMEYER, GREG  
Address: 905 W 26TH STREET APT. 38  
City-St-Zip: LYNN HAVEN, FL 32444

Title: D ( ) Delete  
Name: DUKE, WILL  
Address: 733 CRESTLINE DRIVE  
City-St-Zip: XENIA, OH 45385

Title: D (X) Delete  
Name: EDWARDS, STAN  
Address: 543 SPRING CREEK LANE  
City-St-Zip: LEBANON, TN 37090

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VD (X) Change ( ) Addition  
Name: EDWARDS, STAN  
Address: 543 SPRING CREEK LANE  
City-St-Zip: LEBANON, TN 37090

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: GREG ALDRIDGE

PD

06/11/2007

Electronic Signature of Signing Officer or Director

Date