

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009629

FILED
Apr 24, 2007
Secretary of State

Entity Name: CENTRAL FLORIDA COMMUNITY FELLOWSHIP, INC.

Current Principal Place of Business:

4805 LAKE SHORE DRIVE
ST. CLOUD, FL 34772

New Principal Place of Business:

2893 BIG SKY BLVD.
SUITE 1
KISSIMMEE, FL 34744

Current Mailing Address:

4805 LAKE SHORE DRIVE
ST. CLOUD, FL 34772

New Mailing Address:

2893 BIG SKY BLVD.
SUITE 1
KISSIMMEE, FL 34744

FEI Number: 20-0376440

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DESOTO, BRANDI L
4805 LAKE SHORE DRIVE
ST. CLOUD, FL 34772 US

Name and Address of New Registered Agent:

DESOTO, GABRIEL L
4805 LAKE SHORE DRIVE
ST. CLOUD, FL 34772 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: GABRIEL L DESOTO

04/24/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BAUKNIGHT, III, HUBERT P
Address: 4325 MILDRED BASS ROAD
City-St-Zip: ST. CLOUD, FL 34772

Title: DVP () Delete
Name: BAKER, JR., ROBERT O
Address: 4325 MILDRED BASS ROAD
City-St-Zip: ST. CLOUD, FL 34772

Title: D () Delete
Name: BAUKNIGHT, II, HUBERT P
Address: 4325 MILDRED BASS ROAD
City-St-Zip: ST. CLOUD, FL 34772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVP (X) Change () Addition
Name: DESOTO, GABRIEL L
Address: 4805 LAKE SHORE DRIVE
City-St-Zip: ST. CLOUD, FL 34772

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: GABRIEL L DESOTO

VP D

04/24/2007

Electronic Signature of Signing Officer or Director

Date