

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 17, 2007 08:00 AM
Secretary of State

DOCUMENT # N03128

1. Entity Name
CHRISTIAN FELLOWSHIP CHURCH INC.



Principal Place of Business
**500 N. 15 STREET
MEXICO BEACH, FL 32410 US**

Mailing Address
**P.O. BOX 13635
MEXICO BEACH, FL 32410 US**



01092007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2907227

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GIBSON, GUY
274 SOUTH CANAL ST
PORT SAINT JOE, FL 32456**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Kevin J. Milburn

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1-10-07

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

000000589192
01/18/07-80005-011 61.25

10. OFFICERS AND DIRECTORS

TITLE	DT
NAME	GIBSON, GUY
STREET ADDRESS	274 SOUTH CANAL ST
CITY-ST-ZIP	PORT SAINT JOE, FL 32456
TITLE	DT
NAME	RESPRESS, JAMES
STREET ADDRESS	105 RAVEN LANE
CITY-ST-ZIP	WEWAHITCHKA, FL
TITLE	T
NAME	RESPRESS, VIRGINIA
STREET ADDRESS	105 RAVEN LANE
CITY-ST-ZIP	WEWAHITCHKA, FL
TITLE	S
NAME	GRANGER, LAURA
STREET ADDRESS	737 HWY. 71
CITY-ST-ZIP	WEWAHITCHKA, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Virginia Respress
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-07
Date

8506458871
Daytime Phone #