2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2009
Secretary of State

DOCUMENT# N03942

Entity Name: CHRIST FELLOWSHIP CHURCH, INC,

Current Principal Place of Business:

5343 NORTHLAKE BLVD
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

Current Mailing Address:

5343 NORTHLAKE BLVD
PALM BEACH GARDENS, FL 33418

New Mailing Address:

FEI Number: 59-2468077 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MULLINS, THOMAS D.
5343 NORTHLAKE BLVD
PALM BEACH GARDENS, FL 33418 US

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:	DP	( ) Delete
Name:	MULLINS, THOMAS D.	
Address:	8735 N ELIZABETH AVENUE	
City-St-Zip:	LAKE PARK, FL	
Title:	D	( ) Delete
Name:	THARP, JAMES	
Address:	4387 DAWNRIDGE ST	
City-St-Zip:	PALM BEACH GARDENS, FL 33410	
Title:	ST	( ) Delete
Name:	AUSTIN, STEVE	
Address:	1881 W. FREDERICK SMALL RD	
City-St-Zip:	JUPITER, FL 33458	
Title:	D	( ) Delete
Name:	MULLINS, J. T	
Address:	8283 S. BATES DR.	
City-St-Zip:	PALM BEACH GARDENS, FL 33418	
Title:	CDV	( ) Delete
Name:	SMITH, RICHARD M.	
Address:	11847 162ND PL N	
City-St-Zip:	JUPITER, FL 33478	
Title:	D	( ) Delete
Name:	SAUNDERS, DAVID	
Address:	8299 SOUTH BATES ROAD	
City-St-Zip:	PALM BEACH GARDENS, FL 33418	

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:	( ) 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: STEVE AUSTIN ST 04/26/2009
Electronic Signature of Signing Officer or Director — Date