

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011447

FILED
Apr 24, 2009
Secretary of State

Entity Name: GREATEST COMMANDMENTS FOUNDATION, INC.

Current Principal Place of Business:

20851 MYSTIC WAY
NORTH FORT MYERS, FL 33917

New Principal Place of Business:

Current Mailing Address:

20851 MYSTIC WAY
NORTH FORT MYERS, FL 33917

New Mailing Address:

FEI Number: 20-1984643

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALBRATH, BRAD A
1045 CROSSPOINTE DRIVE
NAPLES, FL 34110 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: P () Delete
Name: CLARK, LAWRENCE N
Address: 20851 MYSTIC WAY
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: D () Delete
Name: CLARK, PATRICIA M
Address: 20851 MYSTIC WAY
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: VP () Delete
Name: CLARK, GREGORY W
Address: 2903 WELTON CLIFF DRIVE
City-St-Zip: CEDAR PARK, TX 78613

Title: D () Delete
Name: LONG, KAREN
Address: 12010 ROSIERS BRANCH ROAD
City-St-Zip: HERNDON, VA 20170

Title: D () Delete
Name: CLARK, SANDRA
Address: 2903 WELTON CLIFF DRIVE
City-St-Zip: CEDAR PARK, TX 78613

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:

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: BRAD A. GALBRAITH

ATTY

04/24/2009

Electronic Signature of Signing Officer or Director

Date