

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000077

FILED
May 29, 2009
Secretary of State

Entity Name: CHRIST'S ANGLICAN FELLOWSHIP, INC.

Current Principal Place of Business:

323 SW COUNTRY RD 778
FORT WHITE, FL 32038

New Principal Place of Business:

323 SW COUNTRY RD 778
FORT WHITE, FL 32643

Current Mailing Address:

P.O. BOX 414
HIGH SPRINGS, FL 326550414

New Mailing Address:

FEI Number: 27-0112980 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

KLUEH, ILA HEALY
448 SW COLGATE LOOP
FORT WHITE, FL 320383248 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: D () Delete
Name: CHANDLER, ALAN
Address: 24318 NW 62ND AVENUE
City-St-Zip: ALACHUA, FL 32615

Title: D () Delete
Name: ALEXANDER, AYLEEN
Address: 21316 NW 190TH AVE
City-St-Zip: HIGH SPRINGS, FL 32643

Title: D () Delete
Name: OTERA, MIRIAM H CLERK
Address: 4179 NW 31ST AVE. P.O. BOX 488
City-St-Zip: BELL, FL 326193669

Title: D () Delete
Name: KLUEH, STAN
Address: 448 SW COLGATE LOOP
City-St-Zip: FORT WHITE, FL 320383248

Title: D () Delete
Name: LA CAGNINA, MICHAEL
Address: 5529 NE 51ST AVE
City-St-Zip: HIGH SPRINGS, FL 32643

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: BARRETT, CHARLOTTE D
Address: 24019 NW 196TH TERR
City-St-Zip: HIGH SPRINGS, FL 32643

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: ILA H. KLUEH

TREA

05/29/2009

Electronic Signature of Signing Officer or Director

Date