2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011520

FILED Mar 09, 2006 Secretary of State

Entity Name: CORNERSTONE FELLOWSHIP CHURCH, INC.

Current Principal Place of Business:			New Principal Place of Business:	New Principal Place of Business:	
PO BOX 2 PERRY, F					
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
PO BOX 2 PERRY, F					
FEI Number	: 84-1691805	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status	s Desired()	
Name and	l Address of	Current Registered Agent:	Name and Address of New Registered A	gent:	
A1A REGISTERED AGENT INC. 92 SADBERRY ROAD QUINCY, FL 32351 US			AGNER, BONNIE S SEC 2450 W FAIR RD PERRY, FL 32347 US	2450 W FAIR RD	
	e named entity e of Florida.	submits this statement for the p	urpose of changing its registered office or registered	agent, or both,	
SIGNATUI	RE: BONNIE	SUE AGNER	03/09/2006	<u> </u>	
	Electro	nic Signature of Registered Age	nt Date		
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	
Title: Name: Address: City-St-Zip:	WHORTON, G 200 E PACE I	DR .	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	D (MARKEY, DAI 902 E JULIA PERRY, FL 3		Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	D (LUNDY, DOYL 2510 LUNDY I PERRY, FL 3	LANE	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	P (WHITFILED, F 2929 N US HV PERRY, FL 3	VY 221	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	V (AGNER, SAMI 2450 W FAIR PERRY, FL 3	DR	Title: V (X) Change () Addition Name: AGNER, SAMMY Address: 2450 W FAIR RD City-St-Zip: PERRY, FL 32347		
Title: Name: Address: City-St-Zip:	S (AGNER, BONI 2450 W FAIR PERRY, FL 3	DR	Title: S (X) Change () Addition Name: AGNER, BONNIE SUE Address: 2450 W FAIR RD City-St-Zip: PERRY, FL 32347		

I hereby certify that the information supplied with this filing does not qualify for the 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: BONNIE SUE AGNER S 03/09/2006