

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011520

FILED
Apr 17, 2009
Secretary of State

Entity Name: CORNERSTONE FELLOWSHIP CHURCH, INC.

Current Principal Place of Business:

1713 S JEFFERSON ST
PERRY, FL 32348

New Principal Place of Business:

601 E LAFAYETTE
PERRY, FL 32347

Current Mailing Address:

PO BOX 272
PERRY, FL 32348

New Mailing Address:

FEI Number: 84-1691805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGNER, BONNIE S SEC
2450 W FAIR RD
PERRY, FL 32347 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: D () Delete
Name: WHORTON, GLEN
Address: 200 E PACE DR
City-St-Zip: PERRY, FL 32347

Title: D () Delete
Name: MARKEY, DANA
Address: 902 E JULIA
City-St-Zip: PERRY, FL 32347

Title: D () Delete
Name: LUNDY, DOYLE
Address: 2510 LUNDY LANE
City-St-Zip: PERRY, FL 32347

Title: P () Delete
Name: WHITFIELD, RAY
Address: 2929 N US HWY 221
City-St-Zip: PERRY, FL 32347

Title: V () Delete
Name: AGNER, SAMMY
Address: 2450 W FAIR RD
City-St-Zip: PERRY, FL 32347

Title: S () Delete
Name: AGNER, BONNIE SUE
Address: 2450 W FAIR RD
City-St-Zip: PERRY, FL 32347

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
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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: BONNIE SUE AGNER

S

04/17/2009

Electronic Signature of Signing Officer or Director

Date