

Division of Corporations Page 1 of 1
NO60000001402

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850) 617-6380

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

**REGISTERED AGENT CHANGE
NCF CORPORATION**

Certificate of Status	0
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Corporate Filing Menu

Help

Bob
2/25/11
2/25/2011

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NCF CORPORATION
Name of Corporation

DOCUMENT NUMBER: N06000001402

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Timothy W. Townsend
Name of Contact Person

National Christian Foundation
Firm/Company

11625 Rainwater Dr. Ste 500
Address

Alpharetta, GA 30009
City/State and Zip Code

ttownsend@nationalchristian.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ted Day at (678) 892-1743
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045 (8/05)

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: NCF CORPORATION
2. The principal office address: 1408 NORTH WEST SHORE BLVD., SUITE 504, TAMPA, FL 33622
3. The mailing address (if different): 11625 RAINWATER DRIVE SUITE 500 ALPHARETTA GA 30009

4. Date of incorporation/qualification: 02/08/2006 Document number: N06000001402

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Jason A Havens

4400 EAST HIGHWAY 20, SUITE 211

NICEVILLE FL 32578

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
Signature of an officer or director

KENNETH M. BOWERS SECRETARY
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

By: [Signature]
Signature of Registered Agent

02/24/2011
Date

If Signing: Chris McNeair

Assistant Secretary
Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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