2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2008
Secretary of State

DOCUMENT# N06000002947

Entity Name: PHILIPPINE CHRISTIAN RELIEF FUND INC

Current Principal Place of Business:

40955 CR 54 E
ZEPHYRHILLS, FL 33540

New Principal Place of Business:

Current Mailing Address:

40955 CR 54 E
ZEPHYRHILLS, FL 33540

New Mailing Address:

FEI Number: 41-2202896 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GUILFORD, MARK
40955 CR 54 E
ZEPHYRHILLS, FL 33540 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: PSD ( ) Delete
Name: GUILGORD, MARK
Address: 40955 CR 54 E
City-St-Zip: ZEPHYRHILLS, FL 33540

Title: VTD ( ) Delete
Name: GUILGORD, CONSUELO
Address: 40955 CR 54 E
City-St-Zip: ZEPHYRHILLS, FL 33540

Title: D ( ) Delete
Name: WHITE, SANDRA
Address: 171 PROSPECT ST
City-St-Zip: HORNEL, NY 14843

Title: D ( ) Delete
Name: GUILFORD, ROBERT V
Address: 5621 RICK DR
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: D ( ) Delete
Name: ALMUALLAS, WELLA
Address: 0158 NIVEL HILLS LAHUG
City-St-Zip: 6000 CEBU CITY, PH

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: MARK GUILFORD PSD 03/26/2008

Electronic Signature of Signing Officer or Director — Date