

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010540

FILED
Jan 17, 2011
Secretary of State

Entity Name: CHRISTLIKE FELLOWSHIP INC.

Current Principal Place of Business:

3249 ALLANDALE DR.
HOLIDAY, FL 34691

New Principal Place of Business:

Current Mailing Address:

3249 ALLANDALE DR..
HOLIDAY, FL 34691

New Mailing Address:

P.O BOX 3100.
HOLIDAY, FL 34692

FEI Number: 22-3944195

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CRAYTON SR., JOHN F PASTOR
3249 ALLANDALE DR.
HOLIDAY, FL 34691 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: REV.
Name: CRAYTON SR., JOHN F PASTOR
Address: 3249 ALLANDALE DR.
City-St-Zip: HOLIDAY, FL 34691

Title: SIS
Name: CRAYTON, VESTINA F TREASUR
Address: 3249 ALLANDALE DR.
City-St-Zip: HOLIDAY, FL 34691

Title: MIN
Name: LEE SR., ALBERT CHAIR
Address: 1522 BAY VIEW ST.
City-St-Zip: TARPON SPRINGS, FL 34689

Title: DEA
Name: BROOKS, WILLIE F TRUSTEE
Address: 5401 COLFAX ST. APT. #1
City-St-Zip: CLEARWATER, FL 33760

Title: SIS
Name: CRAYTON, LINDA V SECR
Address: 1108 CALTON ST.
City-St-Zip: CLEARWATER, FL 33755

I hereby 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 all other like empowered.

SIGNATURE: JOHN F CRAYTON SR.

REV

01/17/2011

Electronic Signature of Signing Officer or Director

Date