

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000013146

FILED
Jan 12, 2009
Secretary of State

Entity Name: AMBASSADORS FOR CHRIST CAMPUS MINISTRIES INC

Current Principal Place of Business:

2870 N MERIDIAN RD
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

2870 N MERIDIAN RD
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 51-0627879 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DENNARD, HARRY A
3758 CUNARD DR
TALLAHASSEE, FL 32311 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: P () Delete
Name: HUGHES, BRENNAN
Address: 1951 N. MERIDIAN RD. #67
City-St-Zip: TALLAHASSEE, FL 32303

Title: V () Delete
Name: CRUTCHFIEL, JOHNSON
Address: 815 BRENT DR
City-St-Zip: TALLAHASSEE, FL 32305

Title: V () Delete
Name: BROWN, MIKE
Address: 1404 BALBOA DR
City-St-Zip: TALLAHASSEE, FL 32305

Title: S () Delete
Name: LEONARD, JOHNATHAN
Address: 2363 AJAX RD
City-St-Zip: TALLAHASSEE, FL 32311

Title: T () Delete
Name: DENNARD, HARRY A
Address: 3758 CUNARD DR
City-St-Zip: TALLAHASSEE, FL 32311

Title: D () Delete
Name: STEWART, LEE
Address: 4427 CHAIRES CROSSROADS
City-St-Zip: TALLHASSEE, FL 32317

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: BRENNAN T. HUGHES

P

01/12/2009

Electronic Signature of Signing Officer or Director

Date