## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000003457

Entity Name: FELLOWSHIP UNION, INC.

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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1111 CENTER STONE LANE RIVIERA BEACH, FL 33404

Current Mailing Address: New Mailing Address:

1111 CENTER STONE LANE RIVIERA BEACH, FL 33404

FEI Number: 74-3217879 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CIGGS, JAMES CIGGS, JAMES W

1111 CENTER STONE LANE
RIVIERA BEACH, FL 33404 US
RIVIERA BEACH, FL 33404 US

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: JAMES W. CIGGS 04/15/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: DP (X) Change ( ) Addition Name: CIGGS, JAMES W

Address: 1111 CENTER STONE LANE Address: 1111 CENTER STONE LANE
City-St-Zip: RIVIERA BEACH, FL 33404 City-St-Zip: RIVIERA BEACH, FL 33404

Title: DT ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 KING, JOSEPH
 Name:

 Address:
 444 NW 10 AVE.
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL 33311
 City-St-Zip:

Title: DV ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MITCHELL, LARRY D.
 Name:

 Address:
 3360 NW 205 ST.
 Address:

 City-St-Zip:
 OPA LOCKA, FL 33056
 City-St-Zip:

Title: DS ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 HUGLEY, ANTHONY
 Name:

 Address:
 4241 NW 19 ST., #161
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL 33313
 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: JAMES W. CIGGS DP 04/15/2009