2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 26, 2009
Secretary of State

DOCUMENT# N07000009789

Entity Name: CAMPUS CRUSADE FOR CHRIST - WEST AFRICA, INC.

Current Principal Place of Business:

% GCM - WEST AFRICA
UPO, PMB 27, LEGON
ACCRA, GHANA, WEST AFRICA, L GHANA

New Principal Place of Business:

Current Mailing Address:

% GENERAL COUNSEL'S OFFICE
100 LAKE HART DRIVE MC 3500
ORLANDO, FL 32832

New Mailing Address:

FEI Number: 26-1281406 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:	PD	( ) Delete
Name:	OKOMOHWO, AUSTIN	
Address:	100 LAKE HART DRIVE - 2100	
City-St-Zip:	ORLANDO, FL 32832	
Title:	CD	( ) Delete
Name:	ADADEVOH, DELANYO T	
Address:	100 LAKE HART DRIVE - 2100	
City-St-Zip:	ORLANDO, FL 32832	
Title:	TD	( ) Delete
Name:	ADU-AMOANI, STEPHEN	
Address:	100 LAKE HART DRIVE - 2100	
City-St-Zip:	ORLANDO, FL 32832	
Title:	SD	( ) Delete
Name:	JARVA, HELENA	
Address:	100 LAKE HART DRIVE - 2100	
City-St-Zip:	ORLANDO, FL 32832	
Title:	S	( ) Delete
Name:	HAUER, SALLY E	
Address:	100 LAKE HART DRIVE - 3500	
City-St-Zip:	ORLANDO, FL 32832	

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: SALLY E. HAUER SEC 08/26/2009
Electronic Signature of Signing Officer or Director — Date