

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003923

FILED
Apr 10, 2009
Secretary of State

Entity Name: AMERICAN CHRISTIAN FICTION WRITERS FOUNDATION, INC.

Current Principal Place of Business:

1098 WALDEN BLVD
PALM BAY, FL 32909

New Principal Place of Business:

Current Mailing Address:

PO BOX 101066
PALM BAY, FL 32910

New Mailing Address:

FEI Number: 26-2814005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAUCK, RACHEL
1098 WALDEN BLVD
PALM BAY, FL 32909 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Change (X) Addition
Name: COBLE, COLLEEN
Address: 414 STITT ST
City-St-Zip: WABASH, IN 46992

Title: S () Change (X) Addition
Name: MEYERS, PAMELA
Address: 2434 BRANDENBERRY CT 2D
City-St-Zip: ARLINGTON HEIGHTS, IL 60004

Title: T () Change (X) Addition
Name: HAUCK, RACHEL
Address: 1098 WALDEN BLVD
City-St-Zip: PALM BAY, FL 32909

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: RACHEL HAUCK

T

04/10/2009

Electronic Signature of Signing Officer or Director

Date