2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007903

FILED Mar 16, 2009 Secretary of State

Entity Name: GRETNA KINGDOM FELLOWSHIP CENTER, INC.

Current Principal Place of Business: New Principal Place of Business:

14804 MAIN STREET GRETNA, FL 32332

Current Mailing Address: New Mailing Address:

P.O. BOX 911 GRETNA, FL 32332

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

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

WRIGHT, CATHERINE M WRIGHT, KATHY M 2307 VIA SARDINIA STREET 2307 VIA SARDINIA STREET

TALLAHASSEE, FL 32303 TALLAHASSEE, FL 32303

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: KATHY M WRIGHT 03/16/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

NOLEN, ANNIE D REED, CORESSA Name: Name: Address: 14804 MAIN STREET Address: 14804 MAIN STREET GRETNA, FL 32332 City-St-Zip: GRETNA, FL 32332 City-St-Zip:

Title: () Delete Title: (X) Change () Addition Name:

WRIGHT, CATHERINE M PASTOR Name: WRIGHT, KATHY M PASTOR Address: 14804 MAIN STREET Address: 14804 MAIN STREET City-St-Zip: GRETNA, FL 32332 City-St-Zip: GRETNA, FL 32332

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: KATHY M WRIGHT Ρ 03/16/2009