2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2010
Secretary of State

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Entity Name: SON SHINE CHRISTIAN FELLOWSHIP, INC.

Current Principal Place of Business:

5 ANDRE STREET
LAKE PLACID, FL 33852 US

New Principal Place of Business:

Current Mailing Address:

5 ANDRE STREET
LAKE PLACID, FL 33852 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

GODWIN, WAYNE
1170 LAKE GROVES ROAD, N.W.
LAKE PLACID, FL 33852 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: E
Name: WESTERGARD, CHARLES
Address: 2 HERSHEY LANE
City-St-Zip: LAKE PLACID, FL 33852 US

Title: E
Name: LARRY, MOLLAND
Address: 50 VICTORIA LANE
City-St-Zip: LAKE PLACID, FL 33852 US

Title: P
Name: GRIFFIN, BRUCE
Address: 31 PRYOR LANE
City-St-Zip: LAKE PLACID, FL 33852 US

Title: FS
Name: WEAVER, LOUISE
Address: 2 DIANE DRIVE
City-St-Zip: LAKE PLACID, FL 33852 US

Title: T
Name: LAGRONE, BRENDA
Address: 33 CONNIE DRIVE
City-St-Zip: LAKE PLACID, FL 33852 US

Title: S
Name: CREASY, SUE
Address: 42 BETTY DRIVE
City-St-Zip: LAKE PLACID, FL 33852 US

I hereby 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 all other like empowered.

SIGNATURE: BRUCE GRIFFIN P 03/12/2010
Electronic Signature of Signing Officer or Director Date