

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000010906

FILED  
Mar 07, 2012  
Secretary of State

**Entity Name:** GOOD NEWS THRIFT STORE, INC.

**Current Principal Place of Business:**

619 N DIXIE AVE  
FRUITLAND PARK, FL 34731

**New Principal Place of Business:**

**Current Mailing Address:**

3826 MAGNOLIA DR  
LEESBURG, FL 34748

**New Mailing Address:**

**FEI Number:** 27-3927459

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STANDRIDGE, CLAUDIA  
3826 MAGNOLIA DR  
LEESBURG, FL 34748 US

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

STANDRIDGE, CLAUDIA J  
3826 MAGNOLIA DR  
LEESBURG, FL 34748 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:** CLAUDIA J STANDRIDGE

03/07/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** STANDRIDGE, CLAUDIA J  
**Address:** 3826 MAGNOLIA DR  
**City-St-Zip:** LEESBURG, FL 34748

**Title:** D  
**Name:** PONDS, CAROLYN  
**Address:** 3845 MAGNOLIA DR  
**City-St-Zip:** LEESBURG, FL 34748

**Title:** D  
**Name:** SPARKS, WARD  
**Address:** 33520 PICCIOLA DR  
**City-St-Zip:** FRUITLAND PARK, FL 34731

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:** CLAUDIA J STANDRIDGE

PRES

03/07/2012

Electronic Signature of Signing Officer or Director

Date