

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34462

FILED
Apr 06, 2009
Secretary of State

Entity Name: ALEXANDER CHRISTIAN FOUNDATION OF FLORIDA, INC.

Current Principal Place of Business:

2565 E. KALEY AVE.
ORLANDO, FL 32806 US

New Principal Place of Business:

Current Mailing Address:

24 N. BUMBY AVE
ORLANDO, FL 32803 US

New Mailing Address:

FEI Number: 59-2998159

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTT, CHARLES S
24 N. BUMBY AVE
ORLANDO, FL 32803 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: D () Delete
Name: ROBINSON, JAMES
Address: 5062 CARSON ST
City-St-Zip: ST CLOUD, FL 34771

Title: D () Delete
Name: WOOD, SHAN
Address: 2565 E. KALEY AVE
City-St-Zip: ORLANDO, FL 32806

Title: D (X) Delete
Name: HASSELL, CHUCK
Address: 1101 E. PLYMOUTH AVE
City-St-Zip: DELAND, FL 32724

Title: P () Delete
Name: WILLIAMS, VAUGHN
Address: 2717 NELA AVE
City-St-Zip: ORLANDO, FL 32809

Title: S () Delete
Name: WRIGHT, ROGER
Address: 3010 NORTH EAST 14TH ST
City-St-Zip: OCALA, FL 34470

Title: T () Delete
Name: SCOTT, CHARLES S
Address: 24 N. BUMBY AVENUE
City-St-Zip: ORLANDO, FL 32803

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
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Address:
City-St-Zip:

Title: () Change () Addition
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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: CHARLES S. SCOTT

TREA

04/06/2009

Electronic Signature of Signing Officer or Director

Date