

**2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Aug 02, 2005**  
**Secretary of State**

DOCUMENT# N42831

**Entity Name:** CHURCH GROWTH INVESTMENT FUND, INC.**Current Principal Place of Business:**1320 HENDRICKS AVE  
JACKSONVILLE, FL 32207**New Principal Place of Business:****Current Mailing Address:**1320 HENDRICKS AVE  
JACKSONVILLE, FL 32207**New Mailing Address:****FEI Number:** 59-3063681**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MCCLELLAND, EDDIE L  
1320 HENDRICKS AVE  
JACKSONVILLE, FL 32207 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:** WEEKS, SAM H  
**Address:** 9899 155TH ROAD  
**City-St-Zip:** LIVE OAK, FL 32060 US**Title:** S ( ) Delete  
**Name:** RHINE, MICHAEL J  
**Address:** 1723 E. COBBLESTONE LANE  
**City-St-Zip:** ST. AUGUSTINE, FL 32092 US**Title:** D ( ) Delete  
**Name:** MORRIS, THOMAS O  
**Address:** 4601 W. KENNEDY BOULEVARD, SUITE 215  
**City-St-Zip:** TAMPA, FL 33609 US**Title:** D ( ) Delete  
**Name:** MATULA, MARTY  
**Address:** 507 7TH AVENUE SW  
**City-St-Zip:** LARGO, FL 33770 US**Title:** P ( ) Delete  
**Name:** MCCLELLAND, EDDIE L  
**Address:** 1320 HENDRICKS AVENUE  
**City-St-Zip:** JACKSONVILLE, FL 32207 US**Title:** D ( ) Delete  
**Name:** BRAY, ROBERT V  
**Address:** 20175 KINDERKEMAC AVE  
**City-St-Zip:** PORT CHARLOTTE, FL 33952 US**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  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**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 for the exemption stated in Section 119.07(3)(i), 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: MICHAEL J RHINE

S

08/02/2005

Electronic Signature of Signing Officer or Director

Date