2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42831

FILED Jan 04, 2007 Secretary of State

Entity Name: CHURCH GROWTH INVESTMENT FUND, INC.

Current Principal Place of Business:			New Principal Place of Business:	New Principal Place of Business:		
1320 HENDRICKS AVE JACKSONVILLE, FL 32207			1320 HENDRICKS AVE			
			SUITE 2 JACKSONVILLE, FL 32207			
Current Mailing Address:			New Mailing Address:			
1320 HENDRICKS AVE JACKSONVILLE, FL 32207			1320 HENDRICKS AVE	1320 HENDRICKS AVE		
			SUITE 2 JACKSONVILLE, FL 32207			
El Number	: 59-3063681	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired	d()		
Name and	d Address of C	urrent Registered Agent:	Name and Address of New Registered Agent:			
	AND, EDDIE L		MCCLELLAND, EDDIE L			
320 HENDRICKS AVE ACKSONVILLE, FL 32207 US			1320 HENDRICKS AVE SUITE 2			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	VILLE , I L 022		JACKSONVILLE, FL 32207 US			
	e named entity s e of Florida.	submits this statement for the	ourpose of changing its registered office or registered agent,	or both,		
SIGNATURE:			01/04/2007			
	Electron	ic Signature of Registered Ag	ent Date			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIF	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
itle:	, ,	Delete	Title: () Change () Addition			
Name: Nddress:	MORRIS, THOM 4601 W KENNE	EDY BOULEVARD, SUITE 215	Name: Address:			
City-St-Zip:	TAMPA, FL 336	· ·	City-St-Zip:			
itle:	S ()	Delete	Title: () Change () Addition			
lame:	RHINE, MICHAE		Name:			
Address: Dity-St-Zip:	1723 E. COBBL		Address:			
nty-st-zip.	ST. AUGUSTINE	E, FL 32092 03	City-St-Zip:			
ïtle:	, ,	Delete	Title: D (X) Change () Addition			
lame:	RICE, DAVID 27 SEVILLA STI	DEET	Name: BRAY, ROBERT V Address: 20175 KINDERKEMAC AVENUE			
\ddress: >ity-St-Zip:		E, FL 32084 US	Address: 20175 KINDERKEMAC AVENUE City-St-Zip: PORT CHARLOTTE, FL 33952 US			
,,, o. <u>_</u> .p.	01.7.0000112	1,72 0200100	ony of 2.p. 1 on 1 on 12.712, 12 occur of			
itle:		Delete	Title: P (X) Change () Addition			
lame: .ddress:	MCCLELLAND, 1320 HENDRIC		Name: MCCLELLAND, EDDIE L Address: 1320 HENDRICKS AVENUE STE 2			
city-St-Zip:	JACKSONVILLE		City-St-Zip: JACKSONVILLE, FL 32207 US			
ītle:	D ()	Delete	Title: () Change () Addition			
lame:	SCOTT, T A		Name:			
\ddress:	1043 PINEVIEW		Address:			
	LIVE OAK, FL 3	32064 US	City-St-Zip:			
City-St-Zip:		Delete	Title: () Change () Addition			
	, ,		Name			
City-St-Zip: Title: Name:	BILES, L T		Name:			
itle:	` '		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 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: MICHAEL J RHINE S 01/04/2007