

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42831

FILED
Jan 05, 2011
Secretary of State

Entity Name: CHURCH GROWTH INVESTMENT FUND, INC.

Current Principal Place of Business:

1320 HENDRICKS AVE
SUITE 2
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

1320 HENDRICKS AVE
SUITE 2
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
SUITE 2
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
Name: BRAY, ROBERT V
Address: 20175 KINDERKEMAC AVENUE
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: S
Name: RHINE, MICHAEL J
Address: 1723 E. COBBLESTONE LANE
City-St-Zip: ST. AUGUSTINE, FL 32092 US

Title: D
Name: RICE, DAVID P
Address: 148 BARTRAM PARKE DRIVE
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: P
Name: MCCLELLAND, EDDIE L
Address: 1320 HENDRICKS AVENUE STE 2
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: D
Name: GRIFFIN, WASSIE
Address: 9722 SW 1ST PLACE
City-St-Zip: GAINESVILLE, FL 32607 US

Title: D
Name: SCOTT, T A
Address: 1043 PINEVIEW CIRCLE
City-St-Zip: LIVE OAK, FL 32060 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: MICHAEL J RHINE

S

01/05/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date