## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N42886

FILED Jan 16, 2009 Secretary of State

Entity Name: FLORIDA FELLOWSHIP, INC.

Current Principal Place of Business: New Principal Place of Business:

3375-G CAPITAL CIR. TALLAHASSEE, FL 32308

Current Mailing Address: New Mailing Address:

3375-G CAPITAL CIR. TALLAHASSEE, FL 32308

FEI Number: 59-3085176 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

THOMSON, W. FREDERICK
3375--G CAPITAL CR. NE
TALLAHASSEE, FL 32308 US
THOMSON, W. FREDERICK DIRECTO
3375--G CAPITAL CR. NE
TALLAHASSEE, FL 32308 US
TALLAHASSEE, FL 32308 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: W. FREDERICK THOMSON 01/16/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: THOMSON, W. FREDERIC, K Name: THOMSON, W. FREDERICK DIRECTO

 Address:
 2921 WOODSIDE DR.
 Address:
 812 GREENBRIER LANE

 City-St-Zip:
 TALLAHASSEE, FL
 City-St-Zip:
 TALLAHASSEE, FL
 32312

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 WILLIS, STEVEN M.,
 Name:
 WILLIS, STEVEN M.,

 Address:
 4494 O'SHEA CT.
 Address:
 4494 O'SHEA CT.

 City-St-Zip:
 TALLAHASSEE, FL
 City-St-Zip:
 TALLAHASSEE, FL

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 DUNCAN, WILTON
 Name:

 Address:
 3421 VALLEY CREEK DRIVE
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32312
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 BRUECKHEIMAR, WILLIAM R JR
 Name:

 Address:
 1304 BATTON ROAD
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32308
 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: W. FREDERICK THOMSON D 01/16/2009