

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44313

FILED
Feb 13, 2008
Secretary of State

Entity Name: FELLOWSHIP OF CHRISTIAN INSURANCE AGENTS, INC.

Current Principal Place of Business:

913 ALLEGRO LANE
APOLLO BEACH, FL 33572 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1148
BRANDON, FL 33511 US

New Mailing Address:

FEI Number: 59-3079026

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATSON, DAVID G. JR.
913 ALLEGRO LANE
APOLLO BEACH, FL 33572 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: WATSON, DAVID G. JR.,
Address: 913 ALLEGRO LANE
City-St-Zip: APOLLO BEACH, FL 33572

Title: D () Delete
Name: WATSON, BETTY B
Address: 913 ALLEGRO LANE
City-St-Zip: APOLLO BEACH, FL 33572

Title: D () Delete
Name: LOWE, FRANK,
Address: 913 ALLEGRO LANE
City-St-Zip: APOLLO BEACH, FL 33572

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:

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: BETTY B. WATSON

VP

02/13/2008

Electronic Signature of Signing Officer or Director

Date