

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45805

FILED  
Apr 23, 2008  
Secretary of State

Entity Name: CHRISTIAN GROWTH FELLOWSHIP, INC.

**Current Principal Place of Business:**

149 APRIL LANE  
TAMPA, FL 33613 US

**New Principal Place of Business:**

**Current Mailing Address:**

149 APRIL LANE  
TAMPA, FL 33613 US

**New Mailing Address:**

FEI Number: 59-2965187

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PENNINGTON, L J  
1908 E. 115TH AVENUE  
TAMPA, FL 33612 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: PDT ( ) Delete  
Name: PENNINGTON, L J  
Address: 1908 E. 115TH AVENUE  
City-St-Zip: TAMPA, FL

Title: VT ( ) Delete  
Name: PENNINGTON, CONNIE  
Address: 1908 E. 115TH AVENUE  
City-St-Zip: TAMPA, FL

Title: TS ( ) Delete  
Name: BRANDON, MICHAEL W SR  
Address: 17843 SUNRISE DR  
City-St-Zip: LUTZ, FL 33549

Title: T ( ) Delete  
Name: COLEMAN, NAN  
Address: 5209 BELLEFIELD DR  
City-St-Zip: TAMPA, FL 33624

Title: T ( ) Delete  
Name: RICHMOND, REBECCA  
Address: 14916 HARDY DR W  
City-St-Zip: TAMPA, FL 33613

Title: T ( ) Delete  
Name: PENNINGTON, JATHAN  
Address: 9708 OLD PASCO RD.  
City-St-Zip: WESLEY CHAPEL, FL 33544

**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 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: CONNIE PENNINGTON

VT

04/23/2008

Electronic Signature of Signing Officer or Director

Date