

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45805

FILED
Jun 19, 2009
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 ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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: L. J. PENNINGTON

Electronic Signature of Signing Officer or Director

PDT

06/19/2009

_____ Date