2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008
Secretary of State

DOCUMENT# N93000003257

Entity Name: FAMILY CHRISTIAN FELLOWSHIP OF DESTIN, INC.

Current Principal Place of Business:

814 FOREST STREET
DESTIN, FL 32541 US

New Principal Place of Business:

3871 INDIAN TRAIL
3C
DESTIN, FL 32541 US

Current Mailing Address:

P.O. BOX 1549
DESTIN, FL 325411549 US

New Mailing Address:

P.O. BOX 1549
DESTIN, FL 325401549 US

FEI Number: 59-3198736 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

TROULLOS, PHILLIP R
3871 INDIAN TRAIL
UNIT 3C
DESTIN, FL 32541 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:	COB	( ) Delete
Name:	TROULLOS, PHILLIP R	
Address:	3871 INDIAN TRAIL UNIT 3C	
City-St-Zip:	DESTIN, FL	
Title:	D	( ) Delete
Name:	SCHWANT, FRANK	
Address:	302 MOONLIGHT BAY DRIVE	
City-St-Zip:	PANAMA CITY BEACH, FL 32407	
Title:	D	( ) Delete
Name:	GRIMES, GUY C	
Address:	3337 DOYLE HAWKINS ROAD	
City-St-Zip:	NAVARRE, FL	
Title:	D	( ) Delete
Name:	SAUNDERS, FRANK	
Address:	5744 FALCON DR	
City-St-Zip:	MILTON, FL 32570	

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:	

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: PHILLIP R. TROULLOS COB 01/11/2008

Electronic Signature of Signing Officer or Director — Date