

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000691

FILED  
Apr 22, 2009  
Secretary of State

**Entity Name:** CHRISTIAN FOUNDATION MINISTRIES, INC.

**Current Principal Place of Business:**

9018 LAKE SHORE DR.  
YALAHUA, FL 34797

**New Principal Place of Business:**

**Current Mailing Address:**

9018 LAKE SHORE DR.  
YALAHUA, FL 34797

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

GRAINGER, JAMES G  
9018 LAKE SHORE DR.  
YALAHUA, FL 34797 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: DP ( ) Delete  
Name: GRAINGER, JAMES G  
Address: 9018 LAKE SHORE DR.  
City-St-Zip: YALAHUA, FL 34797

Title: D ( ) Delete  
Name: DUTTON, DENNIS M  
Address: 31641 ALANE CT.  
City-St-Zip: TAVARES, FL 32778

Title: D ( ) Delete  
Name: COLON, ROCKY  
Address: P.O. BOX 1321 N/A  
City-St-Zip: LADY LAKE, FL 32158

Title: D ( ) Delete  
Name: HILDEBRAND, JAY  
Address: 744 E STATE RD 44  
City-St-Zip: WILDWOOD, FL 34785

**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: JAMES GRAINGER

DP

04/22/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date