

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005681

FILED
May 24, 2004
Secretary of State**Entity Name:** CHURCH FOUNDATIONAL NETWORK, INC.**Current Principal Place of Business:**4901 FOREST CREEK DRIVE
PACE, FL 32571**New Principal Place of Business:**4900 FOREST CREEK DRIVE
PACE, FL 32571**Current Mailing Address:**4901 FOREST CREEK DRIVE
PACE, FL 32571**New Mailing Address:**4900 FOREST CREEK DRIVE
PACE, FL 32571**FEI Number:** 59-3345542**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SUMRALL, KENNETH I
4901 FOREST CREEK DRIVE
PACE, FL 32571 US**Name and Address of New Registered Agent:**SUMRALL, KENNETH I
4900 FOREST CREEK DRIVE
PACE, FL 32571 US

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: _____

05/24/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SUMRALL, KEN
Address: 4901 FOREST CREEK DRIVE
City-St-Zip: PACE, FL 32571

Title: VD () Delete
Name: LIMBAUGH, MARC
Address: 555 NEWNAN ROAD
City-St-Zip: CARROLLTON, GA 30117

Title: VD () Delete
Name: JOINER, L A
Address: 4406 FOREST VALLEY CIRCLE
City-St-Zip: VALDOSTA, GA 31602

Title: VD () Delete
Name: HOLLIS, JACK
Address: POST OFFICE BOX 450 NA
City-St-Zip: MARIANNA, FL 32446

Title: STD () Delete
Name: HAVICE, DAVID
Address: 1321 LAKESHORE PL.
City-St-Zip: GAINESVILLE, GA 305011510

Title: D () Delete
Name: KELLY, RON
Address: 8590 HWY 98 WEST, BOX 3040
City-St-Zip: PENSACOLA, FL 32506

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SUMRALL, KEN
Address: 4900 FOREST CREEK DRIVE
City-St-Zip: PACE, FL 32571

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: JOINER, L A
Address: 544 NW 18TH LN
City-St-Zip: JENNINGS, FL 32053

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 for the exemption stated in Section 119.07(3)(i), 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: KENNETH I SUMRALL

PD

05/24/2004

Electronic Signature of Signing Officer or Director

Date