

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005681

FILED
Mar 07, 2007
Secretary of State

Entity Name: CHURCH FOUNDATIONAL NETWORK, INC.

Current Principal Place of Business:

4900 FOREST CREEK DRIVE
PACE, FL 32571

New Principal Place of Business:

544 NW18TH LANE
JENNINGS, FL 32053

Current Mailing Address:

4900 FOREST CREEK DRIVE
PACE, FL 32571

New Mailing Address:

544 NW 18TH LANE
JENNINGS, FL 32053

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
4900 FOREST CREEK DRIVE
PACE, FL 32571 US

Name and Address of New Registered Agent:

JOINER, LESTER A
544 NW 18TH LANE
JENNINGS, FL 32053 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: L.A. JOINER

03/07/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SUMRALL, KEN
Address: 4900 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: 544 NW 18TH LN
City-St-Zip: JENNINGS, FL 32053

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: 4901 FOREST CREEK DR
City-St-Zip: PACE, FL 32571

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: EXDR (X) Change () Addition
Name: JOINER, LESTER A
Address: 544 NW 18TH LANE
City-St-Zip: JENNINGS, FL 32053

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

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

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 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: LESTER A. JOINER

EXDR

03/07/2007

Electronic Signature of Signing Officer or Director

Date