## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000006387

FILED Jan 24, 2007 Secretary of State

Entity Name: NATIONAL ASSOCIATION OF CHRISTIAN FINANCIAL CONSULTANTS, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1304 WEST FAIRBANKS AVE. 1055 MAITLAND CENTER COMMONS WINTER PARK, FL 32789 MAITLAND, FL 32751 **Current Mailing Address: New Mailing Address:** 1304 WEST FAIRBANKS AVE. 1055 MAITLAND CENTER COMMONS WINTER PARK, FL 32789 MAITLAND, FL 32751 FEI Number: 59-3479327 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PENNINGTON, WESLEY PENNINGTON, WESLEY 1304 WEST FAIRBANKS AVE. 1055 MAITLAND CENTER COMMONS WINTER PARK, FL 32789 MAITLAND, FL 32751 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: WESLEY PENNINGTON 01/24/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DVP () Delete () Change () Addition SIEGAL, ALAN Name: Name: 50 OLIVER ST SUITE 261 Address: Address: City-St-Zip: NORTH EASTON, MA 02356 City-St-Zip: Title: () Delete Title: () Change () Addition Name: BARBER, BOB Name: Address: 672 RIDGE HILL DR Address: City-St-Zip: NEW BRAUNFELS, TX 78130 City-St-Zip: Title: () Delete Title: () Change () Addition PRESCOTT, ED Name: Name: 12808 TOWNE PKWY SUITE 200 Address: Address: City-St-Zip: LOUISVILLE, KY 40243 City-St-Zip: Title: DS ( ) Delete Title: () Change () Addition Name: SHORT, DWIGHT Name: Address: 5022 PINELAKE RD Address: City-St-Zip: ZEPHYRHILLS, FL 33543 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: BOB BARBER PRES 01/24/2007