

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000002797

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Entity Name:** FORWARD WITH CHRIST EVANGELISTIC ASSOCIATION, INC.

**Current Principal Place of Business:**

3614 HWY 231  
COTTONDALE, FL 32431 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 722  
COTTONDALE, FL 32431 US

**New Mailing Address:**

P. O. BOX 22  
COTTONDALE, FL, FL 32431 US

**FEI Number:** 59-3517758

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EUBANKS, CHARLES R  
3614 HWY 231  
COTTONDALE, FL 32431 US

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

EUBANKS, CHARLES R  
8170 SYCAMORE RD  
GREENSBORO, FL 32330 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:** CHARLES R EUBANKS

01/05/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** DP  
**Name:** EUBANKS, CHARLES R  
**Address:** 8170 SYCAMORE RD  
**City-St-Zip:** GREENSBORO, FL 32330

**Title:** DVP  
**Name:** EUBANKS, CAMILLE M  
**Address:** 8170 SYCAMORE RD  
**City-St-Zip:** GREENSBORO, FL 32330

**Title:** D  
**Name:** MALDONADO, MARY  
**Address:** 4755 HWY 71  
**City-St-Zip:** GREENWOOD, FL 32443

I hereby 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 all other like empowered.

**SIGNATURE:** M CAMILLE EUBANKS

VP

01/05/2012

Electronic Signature of Signing Officer or Director

Date