

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

07 APR 30 PM 12:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N99000005009

1. Entity Name  
GOOD NEWS CHRISTIAN MINISTRIES CORP.



Principal Place of Business  
1004 OLD BAINBRIDGE RD  
TALLAHASSEE, FL 32303

Mailing Address  
5860 CHARLIE & JANNIE TERRACE  
TALLAHASSEE, FL 32312

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04272007

Chg-NP

CR2E037 (12/06)

07

4. FEI Number  
59-3601866

Applied For  
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

CAMPFIELD, HENRY  
5860 CHARLIE & JANNIE TERRACE  
TALLAHASSEE, FL 32312

## 7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25  
Due by May 1, 2007

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make check payable to  
Florida Department of State

## 10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME CAMPFIELD, HENRY  
STREET ADDRESS 5860 CHARLIE & JANNIE TERRACE  
CITY-ST-ZIP TALLAHASSEE, FL 32312

TITLE AS ☐ Delete  
NAME CAMPFIELD, ELOGIA  
STREET ADDRESS 5860 CHARLIE & JANNIE TERRACE  
CITY-ST-ZIP TALLAHASSEE, FL 32312

TITLE T ☐ Delete  
NAME KENION, ANTHONY  
STREET ADDRESS 718 ROLLINS ST  
CITY-ST-ZIP TALLAHASSEE, FL 32303

TITLE TD ☐ Delete  
NAME CAMPFIELD, SOPHIE  
STREET ADDRESS 5860 CHARLIE & JANNIE TERRACE  
CITY-ST-ZIP TALLAHASSEE, FL 32312

TITLE D ☐ Delete  
NAME HARRIS, BERNICE  
STREET ADDRESS 5860 CHARLIE & JANNIE TERRACE  
CITY-ST-ZIP TALLAHASSEE, FL 32312

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

500102236135

05/14/07--01008--010 \*\*70.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #