

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20469

FILED
Apr 21, 2009
Secretary of State

Entity Name: FELLOWSHIP OF CHRISTIAN ATHLETES, INC.

Current Principal Place of Business:

8701 LEEDS RD.
KANSAS CITY, MO 64129

New Principal Place of Business:

Current Mailing Address:

8701 LEEDS RD.
KANSAS CITY, MO 64129

New Mailing Address:

FEI Number: 44-0610626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS RD # 221E
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: EXUM, FRED
Address: ONE UNION SQUARE
City-St-Zip: CHATTANOOGA, TN 37402 US

Title: VC () Delete
Name: NIMMONS, JULIE
Address: 1200 EAST UNION
City-St-Zip: LITCHFIELD, IL 62056

Title: PRES () Delete
Name: STECKEL, LES
Address: 8701 LEEDS RD.
City-St-Zip: KANSAS CITY, MO 64129

Title: TR () Delete
Name: OWEN, JOE
Address: 1930 W. HUGUENOT ROAD
City-St-Zip: RICHMOND, VA 23235 US

Title: D () Delete
Name: ALBRIGHT, JANE
Address: 1845 FAIRMONT
City-St-Zip: WICHITA, KS 67260

Title: S () Delete
Name: MARTHEDEAL, NEIL
Address: 4544 S. WALNUT AVENUE
City-St-Zip: FRESNO, CA 93706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: TR (X) Change () Addition
Name: WADMAN, WALLY
Address: 8701 LEEDS ROAD
City-St-Zip: KANSAS CITY, MO 64129 US

Title: TRUS (X) Change () Addition
Name: BALENTINE, JOE
Address: 8701 LEEDS ROAD
City-St-Zip: KANSAS CITY, MO 64129

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

I hereby certify that the information supplied with this filing does not qualify 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: DIANE STINE

PARA

04/21/2009

Electronic Signature of Signing Officer or Director

Date