

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42831

Entity Name: CHURCH GROWTH INVESTMENT FUND, INC.

Current Principal Place of Business:

8383 BAYMEADOWS WAY
JACKSONVILLE, FL 32256

Current Mailing Address:

PO BOX 23069
JACKSONVILLE, FL 32241-3069 US

FEI Number: 59-3063681

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LENHOFF, KURT T
8383 BAYMEADOWS WAY
JACKSONVILLE, FL 32256 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: KURT T. LENHOFF

01/11/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY, TREASURER
Name LENHOFF, KURT T
Address 8383 BAYMEADOWS WAY
City-State-Zip: JACKSONVILLE FL 32256

Title PRESIDENT
Name WHEELER, RICHARD
Address 8383 BAYMEADOWS WAY
City-State-Zip: JACKSONVILLE FL 32256

Title CHAIRMAN
Name HUXFORD, JOHN C
Address 8383 BAYMEADOWS WAY
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name SWEITZER, STEVE
Address 8383 BAYMEADOWS WAY
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name BARTLETT, WILLIAM
Address 8383 BAYMEADOWS WAY
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name LINTON, GARY
Address 8383 BAYMEADOWS WAY
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name BRAY, ROBERT V
Address 8383 BAYMEADOWS WAY
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name DAVIS, JAMES
Address 8383 BAYMEADOWS WAY
City-State-Zip: JACKSONVILLE FL 32256

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: KURT T LENHOFF

SECRETARY

01/11/2022

Electronic Signature of Signing Officer/Director Detail

Date