

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005681

Entity Name: CHURCH FOUNDATIONAL NETWORK, INC.**Current Principal Place of Business:**2221 S BLUE ANGEL PKWY
PENSACOLA, FL 32506**Current Mailing Address:**2221 S BLUE ANGEL PKWY
PENSACOLA, FL 32506**FEI Number: 59-3345542****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STAFFORD, THOMAS D
2221 S BLUE ANGEL PKWY
PENSACOLA, FL 32506 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title EXDR
Name LIPSCOMB, BUFORD M
Address 16461 INNERARITY POINT ROAD
City-State-Zip: PENSACOLA FL 32507

Title STD
Name LIMBAUGH, MARC
Address 555 NEWNAN ROAD
City-State-Zip: CARROLTON GA 30117

Title DIRECTOR
Name SIMPSON, CHARLES
Address 7671 SWEET GUM COURT
City-State-Zip: MOBILE AL 36595

Title DIRECTOR
Name MATHER, JAMES
Address 5659 WILLIAM & MARY STREET
City-State-Zip: MOBILE AL 36608

Title VD
Name HOLLIS, JACK
Address POST OFFICE BOX 450 NA
City-State-Zip: MARIANNA FL 32446

Title D
Name KELLY, RON
Address 4901 FOREST CREEK DR
City-State-Zip: PACE FL 32571

Title DIRECTOR
Name KARPINEN, DON
Address 8722 ESCONDIDO WAY EAST
City-State-Zip: BOCA RATON FL 33433

Title DIRECTOR
Name RICE, RONALD
Address 1798 LIGHTNING
City-State-Zip: NAVARRE FL 32566

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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: BUFORD M LIPSCOMB**EXDR****04/18/2013**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	LIPSCOMB, JOSHUA C
Address	1117 HALYARD PLACE
City-State-Zip:	PENSACOLA FL 32507