

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**Mar 30, 2006 8:00 am**  
**Secretary of State**

03-30-2006 90022 044 \*\*\*\*61.25



**DOCUMENT # 721049**  
 1. Entity Name  
**CHRISTIAN SERVICE CENTER FOR CENTRAL FLORIDA, INC.**

Principal Place of Business      Mailing Address  
**808 W. CENTRAL BLVD.**      **808 W. CENTRAL BLVD.**  
**ORLANDO FL 32805-8807**      **ORLANDO FL 32805-8807**

2. Principal Place of Business      3. Mailing Address  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.  
 City & State      City & State  
 Zip      Country      Zip      Country

4. FEI Number      Applied For  
**59-1353031**      Not Applicable  
 5. Certificate of Status Desired       **\$8.75 Additional Fee Required**



1st MOORE      CR2E037 (10/05)

6. Name and Address of Current Registered Agent  
**STUART, ROBERT**  
**808 W CENTRAL BLVD**  
**ORLANDO FL 32805**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

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 NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>REMART, PETER</b> <b>1180 WOODMARE DR</b> <b>WINTER PARK FL 32789</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ED</b> <b>STUART, ROBERT F</b> <b>1408 KNOLLWOOD CIRCLE</b> <b>COLLEGE PARK FL 32804</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>BHARSAR, CHIRAG</b> <b>1503 S SUMMERLIN BLVD</b> <b>ORLANDO FL 32801</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>WALLACE, DAN</b> <b>113 W LAKE FAITH DR</b> <b>MAITLAND FL 32754</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>ALIVENTO, RENEE</b> <b>5270 MIDDLE COURT</b> <b>ORLANDO FL 32811</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>Renee Alivento</b> <b>5270 Middle Court</b> <b>Orlando FL 32811</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>Zack Kallenbach</b> <b>12 N. Forest Avenue</b> <b>Orlando FL 32803</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>Dan Wallace</b> <b>P.O. Box 2992</b> <b>Winter Park FL 32790</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Robert Stuart      3/15/06      (407) 425-2523