


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jun 18, 2008 8:00 am**  
**Secretary of State**

05-05-2008 90231 018 \*\*\*\*61.25

**DOCUMENT # F95000001668**

1. Entity Name  
**CHRISTIAN LAW ASSOCIATION, INC.**



Principal Place of Business  
**8100 PARK BLVD  
 SUITE 601  
 PINELLAS PARK, FL 33781 US**

Mailing Address  
**PO BOX 4010  
 SEMINOLE, FL 33775 US**

**66014357**



2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

04222008 Chg-NP CR2E037 (12/06)

City & State

4. FEI Number  
**34-1245065**

Applied For  
 Not Applicable

Zip Country

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**GIBBS III, DAVID C ESC.  
 GIBBS LAW FIRM, P.A.  
 5666 SEMINOLE BLVD., STE. 2  
 SEMINOLE, FL 33772**

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 *David C Gibbs III* DATE **5.1.08**

Signature, typed or printed name of registered agent and top if applicable. (NOTE: Registered Agent signature required when reappointing)

**Filing Fee is \$61.25  
 Due by May 1, 2008**

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 GIBBS, JR, DAVID C 5666 SEMINOLE BOULEVARD SEMINOLE, FL 33772</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D KLUTH, STEVEN M 12137 ORANGE BLOSSOM DRIVE SEMINOLE, FL 33772</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D SPARKLIN, REX D 12040 74TH AVE N SEMINOLE, FL 33772</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D GIBBS, GLORIANNE 5666 SEMINOLE BLVD 2 SEMINOLE, FL 33772</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DST GIBBS III, DAVID C 5666 SEMINOLE BLVD 2 SEMINOLE, FL 33772</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D GRAY, ZACHARY S 13429 LAS PALMAS DRIVE LARGO, FL 33774</b>	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
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		<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		<input 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 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 *David C Gibbs III* DATE **6.11.08**

ATTACHMENT

66014357

# F95000001668

Additional Officers and Directors

Director

Mr. James Coates  
19343 Haskell Place  
Land O'Lakes, FL 34639

Director

Rev. Paul Hayenga  
3800 17th Ave N  
St Petersburg, FL 33713

Director

Attorney Barbara Weller  
9364 Fairweather Drive  
Largo, FL 33773

Director

Mrs. Sharon Giddings  
6403 Evergreen Ave.  
Seminole, FL 33772

Director

Rev. Matthew Gibbs  
11298 60<sup>th</sup> Ave. N.  
Seminole, FL 33772

Director / Secretary / Treasurer / RA

Attorney David Gibbs III  
520 Johns Pass Ave.  
Madeira Beach, FL 33708

ATTACHMENT

66014357

**Carin M. Gibbs**

**From:** Carin M. Gibbs [cgibbs@gibbsfirm.com]  
**Sent:** Friday, May 02, 2008 10:20 AM  
**To:** 'corpHELP@dos.state.fl.us'  
**Subject:** Annual Report Filing - Late fee?

Please advise, I tried to fill out the form online but there was not enough room to list all of our directors. I failed to get a printed copy in the mail yesterday. Do I need to send an additional 400.00 today along with my completed report?

Thank you.

**Document Number** F95000001668  
**Business Entity Name** CHRISTIAN LAW ASSOCIATION, INC.  
**FEI Number** 341245065

127.408.2220  
Please advise  
and I will  
pay asap  
if necessary.  
Carin  
Gibbs