

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F95000001668

FILED
Apr 16, 2003
Secretary of State

Entity Name: CHRISTIAN LAW ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 4010
SEMINOLE, FL 33775 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 4010
SEMINOLE, FL 33775 US

New Mailing Address:

FEI Number: 34-1245065 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIBBS III, DAVID C ESQ.
GIBBS LAW FIRM, P.A.
5666 SEMINOLE BLVD., STE. 2
SEMINOLE, FL 33772 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: P () Delete
Name: GIBBS, JR, DAVID C
Address: 5666 SEMINOLE BOULEVARD
City-St-Zip: SEMINOLE, FL 33772

Title: D () Delete
Name: KLUTH, STEVEN M
Address: 12137 ORANGE BLOSSOM DRIVE
City-St-Zip: SEMINOLE, FL 33772

Title: D () Delete
Name: SPARKLIN, REX D
Address: 11493 102ND COURT
City-St-Zip: SEMINOLE, FL 33778

Title: D () Delete
Name: GIBBS, GLORIANNE
Address: 5666 SEMINOLE BLVD 2
City-St-Zip: SEMINOLE, FL 33772

Title: DST () Delete
Name: GIBBS III, DAVID C
Address: 5666 SEMINOLE BLVD 2
City-St-Zip: SEMINOLE, FL 33772

Title: D () Delete
Name: GRAY, ZACHARY S
Address: 13429 LAS PALMAS DRIVE
City-St-Zip: LARGO, FL 33774

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID C GIBBS III

Electronic Signature of Signing Officer or Director

DST

04/16/2003

Date

DIRECTOR, ESTHER L. HOWARD
5666 SEMINOLE BLVD. #2
SEMINOLE, FL 33772

DIRECTOR, MATTHEW D. GIBBS
11298 60TH AVE. N.
SEMINOLE, FL 33772