

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004269

FILED
Apr 12, 2005
Secretary of State

Entity Name: CHRISTIAN TRAINING CENTER, INC.

Current Principal Place of Business:

11668 N. SEDGEMOORE DR.
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 3132
JACKSONVILLE, FL 32206

New Mailing Address:

FEI Number: 02-0619878

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWELL, JUDY
11668 N. SEDGEMOORE DR.
JACKSONVILLE, FL 32257 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: D () Delete
Name: YOUNG, DAVID A
Address: 11668 N. SEDGEMOORE DR.
City-St-Zip: JACKSONVILLE, FL 32257

Title: D () Delete
Name: POWELL, JUDY
Address: 11668 N. SEDGEMOORE DR.
City-St-Zip: JACKSONVILLE, FL 32257

Title: D () Delete
Name: ROHRER, JENNIFER
Address: 11668 N. SEDGEMOORE DR.
City-St-Zip: JACKSONVILLE, FL 32257

Title: D () Delete
Name: CROSBY, REBECCA
Address: 11668 N. SEDGEMOORE DR.
City-St-Zip: JACKSONVILLE, FL 32257

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:

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 A YOUNG

D

04/12/2005

Electronic Signature of Signing Officer or Director

Date