2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# N03000000576

Entity Name: CHURCH'S INDEPENDENT FRANCHISEE ASSOCIATION, INC.

Current Principal Place of Business:

19407 PARK ROW
SUITE 100
HOUSTON, TX 77084

New Principal Place of Business:

Current Mailing Address:

19407 PARK ROW
SUITE 100
HOUSTON, TX 77084

New Mailing Address:

FEI Number: 65-0278773 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WALTERS, MICHAEL A
SMITH GAMBRELL & RUSSELL, LLP
50 N LAURA ST, STE 2200,
JACKSONVILLE, FL 32202 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:	PD	( ) Delete
Name:	KNOBELOCK, MIKE	
Address:	19407 PARK ROW, SUITE 100	
City-St-Zip:	HOUSTON, TX 77084	
Title:	SD	( ) Delete
Name:	CONNER, BARRY	
Address:	5509 BOGIE AVE.	
City-St-Zip:	FARMINGTON, NM 87402	
Title:	TD	( ) Delete
Name:	LUTFI, TONY	
Address:	7230 S. LANDPARK DR., #115	
City-St-Zip:	SACRAMENTO, CA 95831	
Title:	D	( ) Delete
Name:	HABEEB, KAMRAN	
Address:	4510 E. PACIFIC COAST HIGHWAY, SUITE 595	
City-St-Zip:	LONG BEACH, CA 90804	
Title:	D	( ) Delete
Name:	JOHNSON, HARVEY	
Address:	1818 WRIGHTSBORO ROAD	
City-St-Zip:	AUGUSTA, GA 30904	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	TD	(X) Change ( ) Addition
Name:	LUTFI, TONY	
Address:	1501 CORPORATE WAY #200	
City-St-Zip:	SACRAMENTO, CA 95831	
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 Chapter 119, 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: TONY LUTFI TD 04/27/2006
Electronic Signature of Signing Officer or Director — Date