

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
May 02, 2006  
Secretary of State

DOCUMENT# N93000003070

Entity Name: CHRISTIAN EDIFICATION CONFERENCE, INC.

**Current Principal Place of Business:**

RT 1 HWY 90 WEST  
P.O. BOX 322  
COTTONDALE, FL 32431 US

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 393  
POST OFFICE 322  
COTTONDALE, FL 32431 US

**New Mailing Address:**

2659 GREGORY LANE  
POST OFFICE 322  
COTTONDALE, FL 32431 US

FEI Number: 59-3199386      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

JOHNSON, JACKIE  
4067 HWY 90 E  
COTTONDALE, FL 32431 US

**Name and Address of New Registered Agent:**

JOHNSON, JACKIE  
2659 GREGORY LANE  
COTTONDALE, FL 32431 US

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

05/02/2006

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: JOHNSON, JACKIE  
Address: 2659 GREGORY LANE  
City-St-Zip: COTTONDALE, FL 32431

Title: D ( ) Delete  
Name: GILBERT, RANDAL  
Address: 1826 GAINER RD  
City-St-Zip: CHIPLEY, FL 324286041

Title: DS ( ) Delete  
Name: JOHNSON, BONNIE  
Address: 2659 GREGORY LANE  
City-St-Zip: COTTONDALE, FL 32431

Title: S ( ) Delete  
Name: HAYES, ELDORA  
Address: PO BOX 467  
City-St-Zip: ALFORD, FL 32420

Title: D ( ) Delete  
Name: PULLMAN, DELEENA  
Address: 4861 TRAILOR PARK DR  
City-St-Zip: MARIANNA, FL 32448

**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:

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: JACKIE JOHNSON

Electronic Signature of Signing Officer or Director

D

05/02/2006

Date