2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003941

FILED Apr 07, 2006 Secretary of State

Entity Name: CHRIST AMBASSADORS CORP.

Current Principal Place of Business:			New Principal Place of Business:	
	G STREET JSTINE, FL 32	084		
Current Mailing Address:			New Mailing Address:	
P.O. BOX SAINT AL	209 IGUSTINE, FL	32085		
El Numbe	r: 16-1666118	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
lame and	d Address of (Current Registered Agent:	Name and Address	of New Registered Agent:
0 SPRIN	S, ROBERT G STREET JSTINE, FL 32	084 US		
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both
n the Stat	e of Florida. RE:			ed office or registered agent, or both
the Stat	e of Florida. RE:	submits this statement for the particles of Registered Ag		ed office or registered agent, or both
n the Stat	e of Florida. RE:	nic Signature of Registered Ag	ent	
the Stat IGNATU FFICER tle: ame: ddress:	e of Florida. RE: Electron S AND DIREC	nic Signature of Registered Age TORS:) Delete BERT LAWN ST.	ent	Date
the State of the s	Electron S AND DIRECT CEO (SANDERS, RO 129 S. WOODI ST. AUGUSTIN T (SANDERS, HA 903 CLOVEDA	nic Signature of Registered Agr F TORS:) Delete BERT _AWN ST. E, FL 32084) Delete ROLD	ent ADDITIONS/CHANG Title: Name: Address:	Date BES TO OFFICERS AND DIRECTO
the Stat	E of Florida. RE: Electron S AND DIREC CEO (SANDERS, RO 129 S. WOODI ST. AUGUSTIN T (SANDERS, HA 903 CLOVEDA FORT WALTOI	nic Signature of Registered Age FTORS:) Delete BERT LAWN ST. E, FL 32084) Delete ROLD LE CT N BEACH, FL 32547) Delete ORGE	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date GES TO OFFICERS AND DIRECTO () Change () Addition

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: ROBERT SANDERS COL 04/07/2006